



STUDENT FINANCIAL SERVICES  
ACADEMIC YEAR: 2017-2018

STUDENT'S NAME: \_\_\_\_\_ COM ID: \_\_\_\_\_

In a brief statement explain the reason for having zero income for the previous year and how your expenses were met.

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### Zero Income Verification

Students who report zero income on the FAFSA must provide information on how they supported themselves for the past year. Students who live with another family member or friend must estimate the amount of financial assistance provided. Each item must be answered.

Rent/Room	_____ per month
Food	_____ per month
Car note	_____ per month
Car Insurance	_____ per month
Gasoline	_____ per month
Utilities	_____ per month
Phone	
(home or cell)	_____ per month
Medical	_____ per month
Child Care	_____ per month
Personal Items	_____ per month
Other _____	_____ per month

The information listed on this form is true and correct. I understand that i may be subject to a fine, imprisonment or both if information provided on the FAFSA and on this form is false.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date