

## Zero Income Verification

Academic Year: 2019-2020

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.

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