

Please Print and Use Ink – DO NOT LEAVE ANY LINE ON THIS FORM BLANK

2011-12 VERIFICATION SUPPLEMENTAL WORKSHEET

Student Name: _____

ID#: _____

The 2010 income you reported on your financial aid application appears to be unusually low. Please fill out the income and expenses worksheet below. When completed, this worksheet should show how you were able to support yourself and/or your family for 2010. If you are a dependent student, you must include parental information on the back page. In all cases, the total yearly income must equal or exceed the total of all expenses recorded.

Expenses	Student & Spouse	Income	Student & Spouse
Housing	\$ /yr	Earnings from all jobs	\$ /yr
Food	\$ /yr	Unemployment Compensation	\$ /yr
Car payment/Insurance	\$ /yr	Withdrawals from savings	\$ /yr
Car maintenance/Gas	\$ /yr	Social Security/Disability Benefits	\$ /yr
Utilities/Telephone/Cable	\$ /yr	Welfare, AFDC, TANF	\$ /yr
Credit Card Payments	\$ /yr	Child Support Received	\$ /yr
Child Support/Alimony Paid List child(ren)	\$ /yr	Alimony/Palimony Received	\$ /yr
Clothing	\$ /yr	Bills paid by someone else on your behalf (total dollar value)	\$ /yr
Entertainment	\$ /yr	Cash received from family and/or friends	\$ /yr
Child Care	\$ /yr	Total Financial Aid received in 2010	\$ /yr
Other:	\$ /yr	*Support provided by others. Please explain below.	\$ /yr
Other:	\$ /yr	Tribal Benefits received in 2010 (total dollar value)	\$ /yr
Other:	\$ /yr	*Other: Explain Below	\$ /yr
Total 2010 Expenses	\$ /yr	Total 2010 Income	\$ /yr

*Examples of support include food, shelter, clothing, non-cash gifts etc. Be sure to list the total dollar value of support received in 2010.

As certified by the signatures below, all the information provided by myself and/or others is true and complete to the best of my (our) knowledge. I understand that the Financial Aid Office may request additional documentation to verify the above information. Note: If you are a dependent student, you and a parent must sign this form; if you are married, you and your spouse must sign.

Student: _____

Date: _____

Spouse: _____

Date: _____

Dependent students must complete the back of this form.

PARENTS 2010 EXPENSES AND INCOME

Expenses	Parent's	Income	Parent's
Housing	\$ /yr	Earnings from all jobs	\$ /yr
Food	\$ /yr	Unemployment Compensation	\$ /yr
Car payment/Insurance	\$ /yr	Withdrawals from savings	\$ /yr
Car maintenance/Gas	\$ /yr	Social Security/Disability Benefits	\$ /yr
Utilities/Telephone/Cable	\$ /yr	Welfare, AFDC, FAIM	\$ /yr
Credit Card Payments	\$ /yr	Child Support Received	\$ /yr
Child Support/Alimony Paid	\$ /yr	Alimony/Palimony Received	\$ /yr
Clothing	\$ /yr	Bills paid by someone else on your behalf (total dollar value)	\$ /yr
Entertainment	\$ /yr	Cash received from family and/or friends	\$ /yr
Child Care	\$ /yr	Total Financial Aid received in 2010	\$ /yr
Other:	\$ /yr	*Support provided by others. Please explain below.	\$ /yr
Other:	\$ /yr	Tribal Benefits received in 2010 (total dollar value)	\$ /yr
Other:	\$ /yr	*Other: Explain Below	\$ /yr
Total 2010 Parent's Expenses	\$ /yr	Total 2010 Parent's Income	\$ /yr

*Examples of support include food, shelter, clothing, non-cash gifts etc. Be sure to list the total dollar value of support received in 2010.

As certified by the signatures below, all the information provided by myself and/or others is true and complete to the best of my (our) knowledge. I understand that the Financial Aid Office may request additional documentation to verify the above information.

Father/Stepfather: _____

Date: _____

Mother/Stepmother: _____

Date: _____

Please return this form to:

Financial Aid Office
 UTHSCSA Mail Code 7708
 7703 Floyd Curl Drive
 San Antonio, TX 78229-3900
 (210) 567-2635 (210) 567-6643 fax