



Dependent

LOW INCOME CERTIFICATION  
(INCOME LESS THAN \$6,000)

Student Name: \_\_\_\_\_

Parent Name(s) (Print): \_\_\_\_\_ / \_\_\_\_\_

**I certify that my/our total income for the year:**

2017: \$\_\_\_\_\_, which was accurately reported on my 2019-2020 FAFSA.

**Please describe how you and your family survived on such low income:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We are currently receiving income of \$\_\_\_\_\_ per month.

**Please explain how you are supporting yourself now if current income is \$0.00**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Third Party Certification**

**I certify the accuracy of the above statement.**

\_\_\_\_\_  
**Print Name** **Contact Number Area Code/Telephone**

\_\_\_\_\_  
**Signature** **Relationship** **Date**

The parent verification of income and household size is complete based on the information provided.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FAO Signature: \_\_\_\_\_ Date: \_\_\_\_\_