



CLTCC _____
(Campus/Site)

Low Income Questionnaire 2015-2016

Student's Name: _____ Student ID (LoLA #): _____

_____ **I am a Dependent Student** (Student & Parent data required on the FAFSA)
(I do not meet the definition of Independent student shown below)

_____ **I am an Independent Student** - you are able to check at least ONE of following to be true:

- You were born before January 1, 1992.
- You were married, as of the day you filed the Free Application for Federal Student Aid (FAFSA).
- You have children for whom you will provide more than half of their support from July 1, 2015 through June 30, 2016.
- You have dependents (other than your children or spouse) who live with you and you provided more than half of their support and will continue to provide more than half of their support from July 1, 2015 through June 30, 2016.
- When you were 13 years or older you were: an orphan (both parent's deceased), in foster care, or a ward/dependent of the court
- You are a veteran of the U.S. Armed Forces.
- You are currently serving on active duty in the U.S. Armed Forces for purposes other than training.
- You are an emancipated minor as determined by a court in your state of legal residence.
- You are in legal guardianship as determined by a court in your state of legal residence.
- You are an unaccompanied homeless youth as determined by either: your high school or school district homeless liaison, the director of an emergency shelter program funded by HUD, or the director of a runaway or homeless youth basic center transitional living program.

You reported an unusually low amount of household income on your 2015-2016 Free Application for Federal Student Aid (FAFSA). In order to document how the household was maintained on this amount of income, please complete this form and return it to the Office of Financial Aid. An **Independent Student** needs to complete information pertaining to the student only. A **Dependent Student** needs to complete information for both the student and parent(s). If you do not know if you are an Independent or Dependent student, please contact the Office of Financial Aid or go to www.cltcc.edu. *If any question is left unanswered, this form will be returned to the student to complete. Please keep in mind, that if returned, it will delay your award process.*

Please be SPECIFIC and report information for CALENDAR YEAR 2014, not the current year.

(*Do NOT use grandparent(s) information)

Student Gross Amount Received for the 2014 Year	Source of Income and Support	*Parent(s)/Step-parent(s) Gross Amount Received for the 2014 Year
\$	Student's Income from work. (Provide all W2s)	\$
\$	Spouse's Income from work. (Provide all W2s)	\$
\$	Unemployment Compensation**	\$
\$	Workmen's Compensation**	\$
\$	Child Support	\$
\$	Financial Aid	\$
\$	Parent/Other Relatives/Friend	\$
\$	Veteran's Non-education Benefits**	\$
\$	Other Source:	\$

****Please submit documentation if you received any unemployment compensation, and/or veteran's non-education benefits (such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work Study allowances).**

STUDENT

Who provides the following to the STUDENT?	Amount per month	From what source is this being paid? (i.e. I lived with aunt; money earned from my job; I lived with friend)
Car expenses, Gas, Insurance	\$	
Rent	\$	
Utilities	\$	
Food	\$	

PARENT(S)/STEP-PARENT(S)

Who provides the following to the PARENT?	Amount per month	From what source is this being paid? (i.e. I lived with aunt; money earned from my job; I lived with friend)
Car expenses, Gas, Insurance	\$	
Rent	\$	
Utilities	\$	
Food	\$	

Use the space below to provide additional comments needed to explain how the household was maintained on the reported income and to report changes in income and/or living accommodations.

Student's Signature

Date

Parent's Signature

Date

(Both student and parent MUST sign, if student is a dependent student)