



### 2018-2019 Income Summary Form

Financial Aid Office, P.O. Box 917, Henderson, NC 27536

Telephone: (252) 738-3280, Fax: (252) 738-3388, Email: fao@vgcc.edu

The income you reported for you and your family on the 2018-2019 Free Application for Federal Student Aid (FAFSA) appears to be unusually low. Please complete the form and return it to the Financial Aid Office.

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

NOTE: IF you are a “dependent” by Federal financial definitions, you must provide parent/stepparent information in the chart and in the paragraph on this form.

#### Calendar YEAR 2016 Income & Benefits

Sources of Income	Monthly Amount	Number of Months Received	Total Amount for 2016
Employer(s): specify by name below			
➡			
➡			
TANF/WORK FIRST			
Child Support Received			
Social Security Benefits/SSI			
Cash Received from other people of bill paid by others for you. (Examples: medical expenses, transportation, insurance, recreation, clothing, child care. Do not include food and/or housing.)			
Other: specify ➡			
		<b>TOTAL</b>	

If the total income above is less than \$5,000 for the 2016 year, please explain in writing how you and your family were able to support yourselves and how you and your family are planning to do so during the 2018-2019 school year:

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

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(for dependent students)