

**2021-2022  
 INCOME VERIFICATION FORM**

Student Name \_\_\_\_\_ NCCC Student ID \_\_\_\_\_

The income reported on your 2021-2022 FAFSA appears to be insufficient to support the number of people listed in your household. NCCC is requesting you to complete this form to clarify your cost of living.

Please review each section and place an answer in each item even if the answer is zero "0"

Independent & Dependent Students	Income & Resources – List Yearly 2019 Amounts	Dependent Students Only
Student/Spouse	List Annual Amounts from January 2019 - December 2019	Parent (s)
\$	Social Security Disability, Social Security Supplemental Income	\$
\$	Child Support Received	\$
\$	Veterans Non Educational Benefits	\$
\$	Military/Clergy Allowance	\$
\$	Worker’s Compensation	\$
\$	Combat Pay/Military Basic Allowance (BAH)	\$
\$	Support from Relatives or Friends	\$
\$	Unemployment	\$
\$	Other (specify)	\$
\$	Other (specify)	\$

**Please check any benefits that you receive:**

- SNAP/TANF (Food Stamps)     
  WIC Program     
  Free/Reduced Lunch Program  
 Public Assistance     
  Social Security Income     
  Subsidized Housing Income

Please provide an explanation of living arrangements regarding your situation that will help clarify your income and support.

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**CERTIFICATION:**

The information provided is true and complete to the best of my knowledge and reflects the most accurate report of my household’s ability to contribute to my 2021-2022 educational expenses. I understand that I may be required to provide proof of the information given.

Student’s Ink Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent’s Ink Signature (if student is dependent) \_\_\_\_\_

Date \_\_\_\_\_