# DELTA STATE UNIVERSITY

Office of Financial Aid
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## 2023-2024 Low Income Verification Worksheet

Student: _____      DSU ID: _____

Your 2023-2024 Student Aid Report reflects unusually low income for 2021 for your family.  Answer the following questions and return this worksheet to the financial aid office so that processing of your financial aid awards can continue. If item does not apply, write N/A. **All questions must be answered completely or this worksheet will be returned to you.**

How do you pay for food, rent, medical expenses, utilities, etc. each month? (Example:  Social Security, money from family members, child support, etc.)     _____

_____

_____

If you receive money from family or friends, how much did you receive from them monthly in 2021? _____

_____

| ITEM | STUDENT | PARENT |
|---|---|---|
| Child support received in 2021. | $ | $ |
| Alimony received in 2021. | $ | $ |
| Social Security benefits and/or SSI received in 2021.<br>   (Attach a copy of benefits received in 2021.) | $ | $ |
| AFDC or TANF benefits received in 2021. | $ | $ |
| 2021 income earned from work.  Employer: _____ | $ | $ |
| Amount of rent paid monthly to: _____<br>                          (landlord) | $ | $ |

**I certify that the information provided above is correct and I understand that I could face fines and/or imprisonment if I purposely give false or misleading information.**

_____        _____
**Student's Signature**                          **Date**        **Parent's Signature**                                    **Date**