

**Middle Tennessee State University**  
**Financial Aid Office**  
**1301 E. Main Street**  
**218 Cope Administration Building**  
**Murfreesboro, TN 37132**  
**615-898-2830      615-898-5167 (fax)**

**2009-2010**  
**VERIFICATION OF LOW 2008**  
**INCOME OF PARENT**

**Student name:** \_\_\_\_\_ **M#:** \_\_\_\_\_

The 2008 income you reported for your parent(s) on the Free Application for Federal Student Aid (FAFSA) is insufficient to support their household. Before we can determine your financial aid eligibility, you must complete this form and return it to the Financial Aid Office. **Please complete all sections. Incomplete forms will not be reviewed and will delay our determination of your eligibility. You will be required to submit a completed form.**

A. **Was your parent(s) supported by someone else?** \_\_\_\_\_ yes \_\_\_\_\_ no

B. **Income and Expenses for 2008.** Please complete the chart below.

If your parent(s) lived with and was supported by someone else, write **“other”** beside the expenses such as rent, utilities, food, cable, internet, credit card payments etc. that were provided for your parent(s) that do not have an actual dollar value.

If your parent(s) received money from someone else to pay for any expenses (ex. rent, utilities, food, clothing, car payment, credit card payments, etc.) list the total paid on your parent(s) behalf in 2008 and write **“other”** beside the amount.

**Do not leave any blanks. Place a zero in the items that do not apply.**

Resources and Income for the year 2008:	Expenses for the year 2008:
\$ _____ Earnings from work	\$ _____ Rent/mortgage payments, if not living at home.
\$ _____ Unemployment benefits	\$ _____ Utilities, phone, cable, internet
\$ _____ Pension/retirement income	\$ _____ Food
\$ _____ Workman’s compensation	\$ _____ Clothing
\$ _____ Social Security disability benefits	\$ _____ Transportation, gas, car insurance
\$ _____ Social Security retirement benefits	\$ _____ Personal expenses
\$ _____ TANF	\$ _____ Medical expenses
\$ _____ WIC/Food Stamps	\$ _____ Recreation
\$ _____ Child Support received for all children	\$ _____ Child care expenses
\$ _____ Alimony received	\$ _____ Credit card payments
\$ _____ Other resources _____	\$ _____ Other expenses
\$ _____ Support from family/friends	\$ _____ <b>Total Expenses</b>
\$ _____ <b>Total Resources and Income</b>	
Some of the above income and resources are exempt from being counted on the FAFSA, but document how you provide for your basic needs.	

**By my signature below, I certify that all of the information provided is correct. If I purposely give false or misleading information, the federal government may fine me \$20,000 and/or send me to prison.**

\_\_\_\_\_ Print name of parent listed on FAFSA

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of parent listed on FAFSA