## SOUTHERN UNVERSITY AND A&M COLLEGE

Office of Student Financial Aid

## 2015-2016: ZERO INCOME VERIFICATION FORM

According To the Federal Processing Center, you reported zero (\$0) income for yourself and/or family member on

your Free Application for Federal Student Aid (FAFSA). In order to continue the verification process of your file, you and/or your family member must complete and return this form to the Southern University Baton Rouge Office of Student Financial Aid. Student: Student SSN or SID#: Please provide information pertaining to the person(s) reporting zero income: NAME SS# Year Zero Income Relationship to Student Occurred Did you receive any untaxed income in 2014? ☐ Yes ☐ No If yes, please indicate the source and amount: **Income Source** 2014 Untaxed Income 2014 Untaxed Income Parents (Dependent Students only) Student/Spouse Job: **Social Security Benefits** AFDC/TANF Child Support Food Stamps Received Other:\_ Cash Support Received in 2014 Amount: \$ \_ (Cash Support is defined as money, gifts, loans, or any other expense(s) paid on your behalf such as housing, food, clothing, car payments or other expenses such as bills, medical or dental care). Did you and/or your parent(s) (if dependent) file a Federal IRS Income Tax Return for the 2014 tax year? □ Yes  $\square$  No If yes, please submit a signed copy of your (and your parent's, if dependent) IRS Tax Return Transcript(s). > If no, please explain in detail your circumstances and specify how your family or Parent's family (if dependent) was able to meet its financial obligations with zero income. Also, please submit a copy of your and/or your family member'(s') 2014 Wages Record File from the Louisiana Work Department of Labor Unemployment Office (Contact Number: 1-866-783-5567) or submit a Notarized statement acknowledging the monetary expenses received, if requested. For Additional space, you should use the reverse side or attach an additional letter. Our office reserves the right to ask for additional documentation if your explanation does not prove your situation. \*\*Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.\*\* \*\*By signing this worksheet, I (we) certify that all the information reported on it is complete and correct.\*\* Date: \_\_\_\_\_ Student's Signature: If applicable, the following family member must sign and date: Parent's Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_ Date: \_\_\_\_\_\_