

Award Year

Dependency
Status

Student Name: _____ Student ID#: _____

GREENVILLE TECHNICAL COLLEGE

Clarification of Income and Support

Complete the check-marked sections or the section(s) mentioned on the Missing Information Letter.

SECTION A: NON-FILING TAX STATUS:

You Your Spouse Your father (stepfather) Your mother (stepmother)

1. The above person(s) did not and **was not legally required to** file a federal tax return for year _____.

2. The above person(s) did not have earned income from any source in year _____.

SECTION B: MINIMAL INCOME VERIFICATION:

You have indicated an unusually low income for your family and/or yourself which requires that we verify this information. Indicate below the annual income received by members of your household (if applicable).

You Your Spouse Your father (stepfather/parent1) Your mother (stepmother/parent2)

A friend /relative paid obligations /bills on my/my parent's behalf. This may have included grocery money, rent, utilities, etc. The value of the cash support for the year _____ was \$ _____.

BE SURE TO WRITE IN ZEROS IF NO FUNDS WERE RECEIVED. BLANK SPACES CANNOT BE ACCEPTED

SOURCE OF INCOME (Provide Yearly Totals)	Student/Spouse	Parent
Welfare Benefits: AFDC/ADC or TANF	\$	\$
Supplemental Security Income (SSI) or Social Security Benefits	\$	\$
Unemployment Compensation	\$	\$
Disability Benefits other than Social Security	\$	\$
Pensions or Retirement Benefits	\$	\$
Worker's Compensation	\$	\$
TOTAL UNEARNED INCOME	\$	\$

Public Sources of Support/Income for Household	check one	HH Amount
Housing Assistance or Public Utility Assistance	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Food Stamps (SNAP Benefits) at any time during the last 2 years	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$

SECTION C: INDEPENDENT STUDENT WITH DEPENDENTS

I am an independent student with a dependent(s). My parents or another tax filer claimed me on their tax return last year; however, they will not claim me on their _____ federal tax return. They no longer provide more than 50% of my or my child's support. *(Your parent must sign the back of this form.)*

SECTION D-1: CHILD SUPPORT PAID

You indicated on the FAFSA that you, your spouse or your parent pays child support as a result of a separation, divorce or legal requirement. Don't include support for children in your household. **Amount Paid/Year:** _____

Who paid the support: _____ **Person(s) You Paid the Support To:** _____

Name of child(ren): _____

SECTION D-2: SUPPORT OF OTHER HOUSEHOLD MEMBERS

You listed people in your household that are **not members of your immediate family** on your verification or status worksheet. Please list them below and explain your claim that you or your parent(s) will provide more than 50% of the support for the person(s) listed below from July 1, _____ through June 30, _____. We will determine if they can be included in your household for financial aid purposes.

Name of other person(s) you and/or your spouse/parent(s) provide more than 50% of support:

Full Name	Age	Relationship

Continued on back

Student Name: _____ Student ID#: _____

Section D-2 (Continued):

Reason this person(s) listed above lives with you and/or the reason you support them. (Be specific).

Signature of person you or you parent(s) support (if age 18 or over) _____ Date _____

Signature of person you or you parent(s) support (if age 18 or over) _____ Date _____

SECTION E: PARENTAL NON-SUPPORT OF DEPENDENT STUDENT

You indicated that your parents refuse to provide financial support and include their demographic/financial information on the FAFSA. **You understand that you will only be considered for an unsubsidized loan and SC Lottery Tuition Assistance.** Your parent(s) must complete this section and both of you sign below. If this is incorrect, please add your parent(s) information to the FAFSA.

Date parental financial support ended: _____

I/we, the parent(s) do not and will not financially support this student for the current school year, and refuse to provide demographic/financial data for the FAFSA.

Parent please **print** name(s) and sign at the bottom of page: _____

If your parent(s) refuse to sign this statement, you must provide a notarized statement from a third-party (e.g. teacher, pastor, counselor, etc.).

SECTION F: DISLOCATED WORKER

I/my parent lost employment due to a layoff or being fired and did not quit my/their job. **Please attach a signed statement on letterhead from your last employer verifying this information.**

I am/my parent is a stay-at-home parent no longer supported by a spouse, unemployed and having trouble finding or upgrading employment OR am the unemployed spouse of an active duty member of the Armed Forces.

I/my parent was self-employed but now unemployed due to economic conditions or a natural disaster.

SECTION G: TAX IDENTITY THEFT VICTIM

You Your Parent Your Spouse *Spouse's signature* _____

The above tax filer is a victim of IRS tax-related identity theft and has made the IRS aware.

I/we certify that all the information reported on this form is complete and correct. If information on the FAFSA needs to be corrected, I authorize the Financial Aid Office to make those corrections electronically. Warning: If you purposely give false or misleading information on this worksheet, you may be fined, imprisoned or both.

Student's signature _____ Date _____ Phone _____

Parent's signature (*required for dependent students*) _____ Date _____ Phone _____

Return to: Greenville Technical College
Financial Aid Department (MS 6033)
P. O. Box 5616
Greenville, SC 29606-5616

Location: Financial Aid Department
Admissions & Registration Center, McAlister Square
225 S. Pleasantburg Dr
Phone: (864) 250-8000