

Office of Financial Aid • 107 Kincaid Dr. MSC 900 • Toccoa Falls, GA 30598 www.tfc.edu • finaid@tfc.edu • (706) 886-7299 x5435 • (706) 282-6041 fax

STUDENT LOW INCOME STATEMENT

The Federal Government requires colleges to check the accuracy of the information you provided on your Free Application for Federal Student Aid (FAFSA). This process is called verification. You must complete the verification process before the Office of Financial Aid can establish your eligibility for assistance. You must return the information requested on this form in order to be considered for federal financial aid.

First

Social Security #: _____

M.I.

Student Name: _____

TFC ID #: _____

| Telephone #: | | Email: |
|---|------------------------------------|---|
| Please explain below how you met your basic living expenses during 2015. | | |
| Expenses | Monthly Average Amount During 2015 | What was the source of income used to pay these expenses? |
| Rent/Mortgage | | |
| Food | | |
| Utilities | | |
| Transportation | | |
| Personal Expenses | | |
| Other | | |
| | | |
| Certification: I certify that the information provided on this form is true and complete to the best of my knowledge. | | |
| Student Signature: | | Date: |