



Haskell Indian Nations University  
 Financial Aid Office  
 155 Indian Avenue, Box 5027  
 Lawrence, KS 66046

Phone: (785) 749-8468  
 Fax: (785) 832-6617

The income reported on your Free Application for Federal Student Aid (FAFSA) is below \$10,300 for the student and/or parent. Please complete the income information and a justification below indicating how your living expenses were met during the 2015 calendar year.

### 2017- 2018 Low Income Verification

Source of Money Received from January 2015 - December 2015	Parent Annual Amount Jan. 2015 - Dec. 2015	Student Annual Amount Jan. 2015 - Dec. 2015
Income from work (Gross)	\$	\$
Unemployment	\$	\$
Child Support Received	\$	\$
Disability	\$	\$
Vocational Rehabilitation	\$	\$
Social Security Benefits	\$	\$
Aid to Families with Dependent Children (AFDC/ADC)	\$	\$
Earned Income Credit	\$	\$
Food Stamps Received	\$	\$
Housing Allowance	\$	\$
Other: Support Received including Pell and Scholarships	\$	\$
Total Income	\$	\$

**With income below \$10,300, it is mandatory to complete this section.** In this section, you will need to justify how you sustained on the income listed. If you lived with someone who helped support you, please explain. If your parent's income was not sufficient to pay rent/mortgage, food, utilities, and other expenses, explain how their expenses were met:

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**PLEASE SIGN BELOW**

By signing this form, I certify that all of the information reported on this worksheet is complete and correct to the best of my knowledge. I also understand if I purposefully give false or misleading information on this worksheet, I am violating federal statute and could face penalty.

**This form must be completed and signed by a parent if the student is dependent; independent students should complete and sign this form themselves.**

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print Student Name

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent's Signature

\_\_\_\_\_  
 Date