

# Southwestern Christian College 2017-2018 Household Resources Verification



**IMPORTANT:** In reviewing your application for federal financial assistance we have found that you/your spouse, or you/your (step) parent, reported having very low income or no income for 2015. Your application has been selected for verification and it is necessary for you to provide us with documentation indicating your means of support. Please indicate how you were supported in 2015 and include any supporting statements pertinent to your situation.

**By law we have the right to ask for this information before awarding Federal Financial aid.  
No further processing will be done until all documentation is provided.**

Student Last Name	First	Middle	Social Security Number
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Email address	Phone number
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1. How many people live in your household? (      ) Adults    (      ) Children  
 Check one:     [ ] I lived with my parents/step-parents during 2015     [ ] My family lived with another family during 2015  
                       [ ] I lived by myself    [ ] I lived with my partner and/or children
2. 2015 Income earned          Parents \$ \_\_\_\_\_ Self \$ \_\_\_\_\_ Partner \$ \_\_\_\_\_
3. How much is your household rent or house payment per month? \$ \_\_\_\_\_
4. Did you household receive workman's compensation in 2015? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, amount per month \$ \_\_\_\_\_
5. Student's Financial Aid received: Spring 2015 \$ \_\_\_\_\_ Summer 2015 \$ \_\_\_\_\_ Fall 2015 \$ \_\_\_\_\_
6. During 2015 household cash received from friends or extended family. \$ \_\_\_\_\_ Money paid on your behalf. \$ \_\_\_\_\_  
 (Consider additional expenses paid such as food, utilities, transportation, clothing, housing, insurance, etc..)
7. 2015 welfare benefits received including Temporary Assistance for Needy Families (TANF) \$ \_\_\_\_\_ (Excluding food stamps)
8. Did the household receive Food Assistance in 2015? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, amount per month \$ \_\_\_\_\_
9. Household Social Security Benefits received in 2015, that were not taxed (such as SSI) \$ \_\_\_\_\_
10. Did the household receive Housing Assistance in 2015? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, amount per month \$ \_\_\_\_\_
11. 2015 Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S.  
                 Parents \$ \_\_\_\_\_    Self \$ \_\_\_\_\_
12. 2015 IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040-line 28+line 32 or 1040A-line 17. Parents \$ \_\_\_\_\_ Self \$ \_\_\_\_\_
13. Child support received for all children in 2015 (do not include foster care or adoption payment)  
                 Parents \$ \_\_\_\_\_    Self \$ \_\_\_\_\_
14. 2015 Tax exempt interest income from IRS Form 1040-line 8b or 1040A-line 8b.  
                 Parents \$ \_\_\_\_\_    Self \$ \_\_\_\_\_
15. 2015 Untaxed portions of IRA distributions from IRS Form 1040-lines (15a minus 15b) or 1040A-lines (11a minus 11b). **Exclude rollovers.** If negative, enter zero. Parents \$ \_\_\_\_\_ Self \$ \_\_\_\_\_
16. 2015 Untaxed portions of pension s from IRS Form 1040-lines (16a minus 16b) or 1040A-lines (12a minus 12b). **Exclude rollovers.** If negative, enter zero. Parents \$ \_\_\_\_\_ Self \$ \_\_\_\_\_
17. 2015 Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.  
                 Parents \$ \_\_\_\_\_    Self \$ \_\_\_\_\_
18. 2015 Veterans non-education benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educations Work-Study allowances. Parents \$ \_\_\_\_\_ Self \$ \_\_\_\_\_
19. **Please explain on a separate paper or the back of this form in further detail how you/your parents were able to support your household for 2015.**

**WARNING:** If you purposely give false or misleading information to help establish eligibility for federal student aid, you may be subject to a \$20,000 fine, a prison sentence, or both.

By signing this worksheet, I (we) certify that all the information reported to qualify for federal student aid is complete and correct. At least one parent must sign if you are a dependent student.

Student	Date	Parent (or Spouse)	Date
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**Mail Forms to:**  
 Southwestern Christian College/Financial Aid Office  
 P.O. Box 10 Terrell, Texas 75160  
 Office (972) 524-3341 ext. 124 Fax (972) 563-7133