



INDEPENDENT STUDENT 2017-2018 Academic Year Explanation of Support for 2015 Tax Year

Student Name _____ Student ID # _____ Phone # _____

The income that you reported on your 2017-2018 Free Application for Federal Student Aid (FAFSA) appears to be extremely low. Please provide the following information for yourself and your family if appropriate.

DO NOT LEAVE ANY BLANKS. This form will be returned if it is incomplete.

1. Explain how you supported yourself (and your dependents) during **2015**?

2. List below your **YEARLY TOTAL INCOME IN 2015**:

Wages	\$ _____
Welfare benefits (including TANF, UHEAP, SNAP)	\$ _____
Social Security Benefits	\$ _____
Child Support Received	\$ _____
Other income received (explain) _____	\$ _____

Total yearly amount \$ _____

3. Explain how you are supporting yourself (and your dependents) during **2016**?

4. Does any other person give you cash, or help pay your bills or expenses? ☐ YES ☐ NO
If yes, who is helping you? _____ Supporting person's signature is required at below. **Please explain what they pay, the amount they pay, and enter under other income received (above)**

5. List below your **YEARLY TOTAL EXPENSES FOR 2015**

Rent/Mortgage payments	\$ _____
Utilities (electric, gas)	\$ _____
Food	\$ _____
Clothing	\$ _____
Cell Phone	\$ _____
Transportation (Car payments, bus fares)	\$ _____
Car Insurance	\$ _____
Other expenses (explain) _____	\$ _____

Total yearly amount \$ _____

PLEASE NOTE: If total yearly expenses exceeds total income (above) further information will be requested from student and if applicable the spouse. Expenses cannot exceed income, unless provided by the person(s) listed in # 4 on this form.

6. In 2015, did you or your spouse live in another country? ☐ YES ☐ NO **If yes**, what Country _____
 Did you or your spouse earn foreign income in 2015? ☐ YES ☐ NO **If yes**, how much? \$ _____
 Did they pay taxes on this income? ☐ YES ☐ NO **If yes**, how much? \$ _____

If student or your spouse had foreign income or filed a foreign tax return. Please convert to U.S. dollars using the exchange rate that is in effect today. You may find currency conversion information at www.oanda.com.

Student Signature _____ Date _____

Spouse Signature _____ Date _____

Supporting Person Signature _____ Date _____

Return this form to:
BCCC, Financial Aid Office, 275 Swamp Road, Newtown, PA 18940
215 968-8200, Fax 215 504-8522, Email finaid@bucks.edu

Bucks County Community College complies with applicable state and federal civil rights laws and does not discriminate in its educational programs, activities or employment practices.