



FINANCIAL SUPPORT WORKSHEET • 2010-2011

One Stop Student Services - onestop@cwidaho.cc - 208.562.3000 phone - 888.562.3216 fax
5500 East Opportunity Drive - Nampa, ID 83687 - www.cwidaho.cc

The information on your FAFSA suggests that your (or your family's) combined income was unusually low for the number of people in your family. You have reported a combined family income that is less than 50% of the 2009 Poverty Guidelines published by the U.S. Department of Health and Human Services (<http://aspe.hhs.gov/POVERTY/09computations.shtml>) Please clarify your family income AND any non-monetary support you received from any source in 2009 using the worksheet below. **IMPORTANT – Do not leave any question on this worksheet blank. If the answer is “zero” or “does not apply”, write “0” or “n/a”.**

LAST NAME	FIRST NAME	M.I.	STUDENT ID -OR- SOCIAL SECURITY NUMBER
PHONE NUMBER (INCLUDING AREA CODE)	DATE OF BIRTH		

FINANCIAL SUPPORT

1. **Did you/your family live with a relative, friend, or other person rent-free in 2009?** __ Yes __ No
If yes, will you continue to live with a relative, friend, or other person rent-free in 2010? __ Yes __ No

2. **Did a relative, friend, or other person provide food/groceries to you/your family free-of-charge in 2009?** __ Yes __ No
If yes, will your relative, friend, or other person continue to provide food/groceries to you/your family in 2010? __ Yes __ No

3. **Did you/your family receive ANY form of state, local, or federal assistance in 2009?** __ Yes __ No
I.E. Food Stamps, WIC, SSI, child support, housing, medical, or daycare assistance. Please list.

Assistance Provider	Program	2009 Total
		\$
		\$
		\$

4. **Please list ALL income earned from working or cash gifts you received in 2009.**
If you did not work at all in 2009, write “0” in the “2009 Total” Column.

Family Member	Source of Income/Gift or Employer	2009 Total
		\$
		\$
		\$

5. **Please provide an explanation of how you lived and/or supported yourself/your family in 2009.** Complete the following budget breakdown of your living expenses by indicating the amount of each expense and who paid it or how it was paid on your behalf.

Expense	Paid by	\$/Month	2009 Total
Food		\$	\$
Housing		\$	\$
Transportation		\$	\$
Utilities		\$	\$
Personal Expenses/Other		\$	\$

SIGN THIS WORKSHEET

I certify that all the information reported on this document is true and correct to the best of my knowledge. I understand that if I purposely give false or misleading information I may be subject to a fine, imprisonment, or both. I also authorize the College of Western Idaho to make any necessary electronic corrections to my FAFSA based on the information submitted.

STUDENT SIGNATURE	DATE
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CWI delivers college credit instruction, certificates and degrees through its memorandum of understanding with the College of Southern Idaho (CSI) CSI is accredited through The Northwest Commission on Colleges and Universities (NWCCU).