EASTERN OREGON UNIVERSITY

Independent Student with Child or Legal Dependent Income and Benefit Verification

2020-21 Academic Year

EOU Student ID: 910-

Student Name: Phone Number: ( ) - EOU E-mail: @eou.edu

Based on your reported income and household size, your FAFSA verification requires some additional information in order to complete processing. You must complete this worksheet before we can verify your eligibility and disburse your federal financial aid. We understand that this is a sensitive issue, and we do not take it lightly. Thank-you for your understanding.

By signing this worksheet, you certify that all of the information you will give is complete and correct. You understand that you may lose consideration for limited funds, if you do not submit ALL verification documents in a timely manner. Please sign this form in ink. **We are unable to accept e-signed documents**.

Date: _____ Student signature: _____

When complete, bring, scan, mail or fax this form with all required documentation to EOU's Financial Aid Office.

EOU FINANCIAL AID OFFICE, ONE UNIVERSITY BLVD, INLOW HALL # 104, LA GRANDE, OR 97850-2807

Fax: 541-962-3661; eFax: 541-962-3095; E-mail: fao@eou.edu More info at eou.edu/fao

Secure Document Upload: https://static.eou.edu/share-file/financial-aid.html **Questions?** Call 541-962-3550.

All submitted documents become part of your official record and therefore cannot be returned. Documents that become part of your Educational Record are protected for privacy under federal law (FERPA).

PLEASE READ EVERYTHING PLEASE READ EVERYTHING PLEASE READ EVERYTHING

You answered **YES** to at least one of the following FAFSA questions.

50. "Do you now have or will you have children who will receive more than half of their support from you between July 1, 2020 and June 30, 2021?"
51. "Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you, now and through June 30, 2021?"

However, you reported total income of less than half of the published 2018 poverty guideline for your family size. We need to know that we completely understand your situation and have an accurate picture of how you met your living expenses.

Do your parents or someone else provide most of the support for you or your dependents? ◯ **Yes** ◯ **No**

If your answer is **YES**, please stop with this paragraph and change your answer(s) to question(s) 50 and/or 51 on your FAFSA at fafsa.ed.gov. You may then need to provide parental information on your FAFSA before you can resubmit it. If you are otherwise independent, you may still need to change your answer to FAFSA question 93 (household size).

If your answer is **NO**, please provide the information below:

FAFSA Questions 95 through 99		
At any time during 2018 or 2019, did you (or your spouse) or anyone in your household (from FAFSA question 93) receive benefits from any of the federal programs listed? Mark all that apply. Answering these questions will NOT reduce eligibility for student aid or these programs. *Please provide monthly amounts, where appropriate.*	**No**	**Yes**
95. Medicaid or Supplemental Security Income (SSI)		**$**
96. Supplemental Nutrition Assistance Program (SNAP)		**$**
97. Free or Reduced Price School Lunch		
98. Temporary Assistance for Needy Families (TANF) *TANF has different names in many states. Call 1-800-433-3243 to find out the name of your state's program.*		**$**
99. Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)		

FAFSA Questions 44_ (Enter the combined, annual amounts for you and your spouse, if married.)	
44a. Payments to tax-deferred pension and retirement 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. **Do not include** amounts reported in code DD (employer contributions toward employee health benefits).	**$**
44c. Child support received for any of your children. **Do not include** foster care or adoption payments.	**$**
44f. Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). **Do not include** the value of on-base military housing or the value of a basic military allowance for housing.	**$**
44g. Veterans noneducation benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	**$**

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44h. Other untaxed income not reported in items 44a through 44g, such as workers' compensation, disability benefits, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040 Schedule 1 — line 25. **Do not include** extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Innovation and Opportunity Act educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	**$**
44i. Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form. This includes money that you received from a parent or other person whose financial information is not reported on this form and that is not part of a legal child support agreement. **See Notes on page 9 of the FAFSA**.	**$**

If the above information does not sufficiently explain how you met your living expenses in 2018, please provide a detailed statement below that will resolve what appears to be conflicting or incomplete information.

- Please **include** any **excluded** items (with amounts) from the above table (Question 44). While those amounts *will not* be included nor count against your FAFSA EFC, they *will* help explain how you survived and supported your family on so little reported income.
- We recognize that your household size may not have been the same in 2018 as it is now. If your income would have reflected an ability to support your 2018 household size, you could include that in your explanation.
- You can also resolve our question to you, if you can show a budget where your income exceeds your expenses.
- With an innumerable number of options, we cannot list every possibility. Please use your discretion to paint a complete picture for us.

Monthly 2018 Poverty Guidelines for the 48 Continental United States

Household/Family Size	25%	50%	75%	100%
1	253	506	759	$1,012
2	343	686	1,029	$1,372
3	433	866	1,299	$1,732
4	523	1,046	1,569	$2,092
5	613	1,226	1,839	$2,452
6	703	1,406	2,109	$2,812
7	793	1,586	2,379	$3,172
8	883	1,766	2,649	$3,532

If you need more space, please check here and attach a separate page. ☐

Thank-you! We really appreciate your assistance in reconciling this issue promptly.