



HOLMES
COMMUNITY COLLEGE

Office of Financial Aid 2016/2017 Low Income/Non-Tax Filer Verification	FORM -17LINT
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This form is used by the Holmes Financial Aid Office to verify income on students and parents who do not file an IRS 1040, 1040A, or 1040EZ Tax Return. Please be sure to complete this form in its entirety.

Student's Name

Holmes ID Number

An unusually low income was reported on your FAFSA for the year 2015. In order to continue processing your financial aid for the 2016/2017 award year, please check the appropriate box.

Please indicate "0" in the blanks if no income was received. However, keep in mind that the government realizes that there must be some form of income to pay for food, rent, electricity, water, gas, etc.

- Income earned from work \$ _____ in the year 2015.
- Social Security (any type) \$ _____ per month for _____ months in 2015.
- Disability (not Social Security) \$ _____ per month for _____ months in 2015.
- Child Support \$ _____ per month for _____ months in 2015.
- Military Benefits \$ _____ per month for _____ months in 2015.
- Financial Aid \$ _____ in the year 2015 (Grants, Loans, and Work-study)
- Food Stamp/SNAP Benefits \$ _____ in the year 2015.
- TANF Benefits \$ _____ in the year 2015.
- WIC Benefits \$ _____ in the year 2015.
- Support from Others \$ _____ per month for _____ months in 2015.
(provide name and relationship to you)
- Other (describe below) \$ _____ in the year 2015.

A. By signing this worksheet, I certify that all of the above information is true and correct.

Certification and Signature: WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, and/or removed from school. Applications that are suspected to contain fraudulent information will not be awarded federal financial aid. By signing, I certify that all of the above information is true and correct.

Student's Signature
no electronic signature, must be original

Date

Parent's Signature (dependent students only)
no electronic signature, must be original

Date

Return this form and all requested documentation by one of the following means: take to your campus Financial Aid Office, mail to Financial Aid Office, P O Box 216, Goodman, MS 39079, fax to 662-472-9170 or email to finaid@holmescc.edu.