

Student Name:

Government Assistance – Housing/Other

Other (please list):

## University of the Incarnate Word Office of Financial Assistance 2018-2019 Means of Support Form

(Black Ink Only)

4301 Broadway, Box 308 San Antonio, TX 78209 Phone: (210) 829-6008 Fax: (210) 283-5053 finaid@uiwtx.edu www.uiw.edu/finaid Revised 10/2017

CODE: SUPPOR

\_ID Number:\_\_\_\_\_

Address:	City/State/Zip:		Phone:		
You indicated on your FAFSA that support more than 50%, as defined					
1. Please list the following informmore room is needed):	nation for eacl	h child/legal de	ependent who	om you suppo	rt (attach a separate sheet if
Name	Age	Relationsh	ip to You	Clain	ned on 2016 tax return?
					[] Yes [] No
					[] Yes [] No
					[] Yes [] No
					[] Yes [] No
<ul> <li>3. Did you file a federal tax return</li> <li>If Yes, you must utilize the already done so; OR provide www.irs.gov.</li> <li>If No, you must provide cop</li> <li>4. Do you currently work?</li> </ul>	DRT process e an IRS Tax pies of all 201	to transfer you Return Transcr 6 W2s.	r tax informa ipt for 2016	ation into you . You may req	r FAFSA, if you have not uest the transcript at
If Yes, Name of Employer			Current Monthly Earnings		
5. Please indicate any applicable source(s) of other income, and monthly amount(s) – do NOT include financial aid.  Source Applicable? Monthly Amount					
Child Support			[] Yes	[] No	
Cash Support from Family/Other	person		[] Yes	[] No	
Government Assistance – WIC or	· SNAP		[] Yes	[] No	

[] Yes

[] Yes

[] No

[] No

Expense	<b>Monthly Cost</b>	Amount You Pay
Housing (rent or mortgage)		
Food (groceries, etc.)		
Personal Expenses (clothes, entertainment, etc.)		
Utilities (water, electricity, phone, internet, etc.)		
Vehicle Costs (payments, insurance, gas, etc.)		
Insurance (health, home, etc.)		
Debt (credit card, loans, etc.)		
Other obligations (please list):		
After review of the information above, we will determine very the Internal Revenue Service. A denial of the independent varient information and a parent signature. Decisions made tatus are final.	ent status will require that you co	orrect your FAFSA to include
tatus are imai.		
certify that the information above is true and correct. Addinancial aid monies received due to inaccurate, false, or m		