Office of Scholarships and Student Aid

North Carolina Central University

Student Services Building, Suite 106 ● P.O. Box 19496 ● Durham, NC 27707

Phone - 919/530-6180 ● Fax - 919/530-7959

Minimal Income Statement

A review of your financial aid application indicates that an unusually low income was reported for

_____You, the student (and your spouse, if you are married) _____Your Parent(s)

To clarify how **you and/or your parents** lived on your 2011 income, we ask that you complete **ALL** of the information on this form and return it (via mail or fax) to the Office of Scholarships and Student Aid within **15 DAYS.**

A. Student Information (please print legibly)

_____ _____

Name Student ID or Social Security Number

If you have recently moved to the United States, please indicate your date of arrival _____/_____/_____

B. List of the expenses and assistance for 2011

Please list the monthly expenses, the monthly amount of expense paid on your behalf, and the source of support for the 20101expenses listed below. While it may be difficult to determine some of these figures, it is necessary to provide us with the most accurate information. If you own your home, please indicate that under who provided the assistance column below. If living with a roommate, please only provide only your portion of the expenses.

Living Expenses for 2011	**Monthly Expenses**	**Monthly amount of assistance received**	**Who provided the assistance?** (i.e. social services, friend/relative, etc.)
(i.e.) Child care - EXAMPLE	**$500.00**	**$300.00**	**Social Services**
Housing (rent/mortgage)	$_____	$_____	
Child care	$_____	$_____	
Utilities	$_____	$_____	
Insurances	$_____	$_____	
Medical/Dental	$_____	$_____	
transportation, gas, maintenance	$_____	$_____	
Food, clothing, etc.	$_____	$_____	
Other personal expenses	$_____	$_____	
OFFICE USE ONLY			

Please fill in amounts for all that apply: In order to pay bills in 2011 I used:

Savings $_____ Trust Fund $_____ Credit Card $_____ GI Bill $_____

Excess Financial Aid $_____ Received support from another person $_____ Other $_____

If you are living at home, are you paying rent? _____ Yes _____ No

How many adults are in the home that would share the rent? _____

If you are living with someone other than parent(s), does that person pay your portion of the bills

(i.e., rent, bills, etc.)? _____ Yes _____ No

How much is your portion per month? _____

How many months was this paid on your behalf in 2011? _____

Additional comments

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Each person signing this worksheet certifies that all of the information reported is true and accurate.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student signature _____Date _____/_____/_____

Parent signature _____Date _____/_____/_____
(if dependent student)