



## 2017-2018 Income & Resources Statement (Dependent)

MINPAR

Student's Name: \_\_\_\_\_ Evergreen ID: A  
(print) Last First MI

The parent income reported on your 2017-2018 FAFSA appears unusually low to support the number of people in your household. Please complete this form to clarify how you and /or your family were able to provide for needs such as housing, food and utility bills during 2015. We are required to obtain the following information to finalize your student's financial aid eligibility. **Reporting all zeros is not acceptable and this form will be returned as incomplete if it is submitted with no expense/income/withdrawal information listed.**

What were the annual living costs for your Parent(s) in 2015, and how were they paid?

Annual expenses	How much you paid for the year	Method of payment
Housing:	\$	
Food:	\$	
Medical:	\$	
Personal/Misc:	\$	
Transportation:	\$	
Other:	\$	
<i>Example: food</i>	<i>\$3,600</i>	<i>SNAP (Food Stamps)</i>

### Itemized Parent(s) Income for 2015:

Types of Income	Average Annual Income
Income from work:	\$
Unemployment:	\$
Social security or disability:	\$
SNAP and/or TANF:	\$
Veteran non-education benefits:	\$
Child support and/or alimony received:	\$
Support from family/friends not required to pay back:	\$
Other:	\$
Total:	\$

Comments:

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Office of Financial Aid

2700 Evergreen Pkwy NW ▪ Olympia, WA 98505 ▪ phone 360-867-6205 ▪ fax 360-867-6576 ▪ email [finaid@evergreen.edu](mailto:finaid@evergreen.edu)



# the evergreen state college

## olympia, washington

What were the annual living costs for you, the student in 2015, and how were they paid?

Annual expenses	How much you paid for the year	Method of payment
Housing:	\$	
Food:	\$	
Medical:	\$	
Personal/Misc:	\$	
Transportation:	\$	
Other:	\$	
<i>Example: food</i>	<i>\$3,600</i>	<i>SNAP (Food Stamps)</i>

Itemized Student Income for 2015:

Types of Income	Average Annual Income
Income from work:	\$
Unemployment:	\$
Social security or disability:	\$
SNAP and/or TANF:	\$
Veteran non-education benefits:	\$
Child support and/or alimony received:	\$
Support from family/friends not required to pay back:	\$
Other:	\$
Total:	\$

Comments:

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\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

As a dependent student, a parent signature is required

\_\_\_\_\_  
Parent's Name (print) Last First MI

\_\_\_\_\_  
Parent's Signature