2021-2022 No Income Verification Form

Independent students or Parent(s) of dependent students who have no income must complete this form. The income you reported as received in the tax year 2019 on the FAFSA application was “zero”. Federal guidelines require that low/zero income information reported on the FAFSA be verified. Please complete this form and return it to the Financial Aid Office. Your answers will assist West Virginia State University Financial Aid Administrators with verifying the support and income you received in 2019.

PERSONAL INFORMATION

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
<th>Student A#</th>
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Address

City        State        Zip Code

Phone Number (include area code)

Please provide a clear and legible response to ALL of the following questions. If you fail to answer all questions, or leave any question blank, this will delay the processing of your financial aid application.

1. The person completing this form is: ___ Student ___ Parent
2. Did you or a family member have any source of income in 2019? ___ Yes ___ No - If yes, please indicate the source and amount below:

   INCOME SOURCE                                                                 AMOUNT RECEIVED IN 2019
   ___ Social Security Benefits/SSI                                               $
   ___ Earnings from work                                                          $
   ___ Unemployment Compensation                                                   $
   ___ VA Education Benefits                                                       $
   ___ Child Support Received                                                      $
   ___ Alimony Received                                                            $
   ___ Public Assistance (food stamps, housing)                                    $
   ___ Money spent from savings                                                    $
   ___ Private Loans                                                               $
   ___ Monetary gifts from relatives or friends                                   $
   ___ Disbursements/Withdrawal from Pension/Annuity                               $
   ___ Other                                                                       $

If you answered No, please explain how you were supported or supported the family in the space provided on the back of this form. Attach a separate sheet if necessary.
Please explain how you lived in 2019. Explain who paid your rent, utilities, and provided food.

_____________________________________________________________________________________________

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CERTIFICATION STATEMENT

I certify that this information is true and correct to the best of my knowledge. Additionally, I understand purposely giving false or misleading information on this form may result in reduction or repayment of aid, fines and/or imprisonment. Please be aware that income indicated on this form and not listed on your FAFSA will be corrected if the change affects your Expected Family Contribution (EFC).

Student Signature______________________________________   Date___________________

Parent Signature_______________________________________   Date___________________