DEPENDENT LOW INCOME EXPENSE FORM
2015 – 2016

Your application for financial aid was selected for review in a process called **"Verification".** Based upon a review of your total income/resources reported on your Verification Worksheet (V6), it was determined that your household income reported is unusually low for the number of people reported in your household. This form must be completed by the parent who signed the 2015-2016 FAFSA documenting all household expenses incurred during 2014.

A. Student Information

STUDENT NAME: _____ GCU STUDENT NUMBER: _____

Address: _____ Date of Birth: _____

City: _____ State: _____ Zip: _____ Phone No.:_____

B. Yearly Household Expenses for 2014

Parent: Please indicate your yearly household expenses for 2014 for each category below. *Do not leave any answer in items 1-6 blank*. If the answer is "0" or not applicable, please place a "0" in the space provided and use the explanation section below to clearly explain why the expense is "0" or not applicable. If you note an "Other Living Expense" in item 7, please note on the line provided a description of the expense. An incomplete form will delay processing of your financial aid.

Type of Living Expense	Total 2014 Annual Amount Paid
1. Housing/Rent/Mortgage	$
2. Groceries (food/beverage expense only)	$
3. Child Care	$
4. Transportation (e.g. vehicle payments, fuel, insurance, bus/taxi, maintenance)	$
5. Phone (land/cell/fax) and Utilities (electric/gas/water/trash)	$
6. Other Household Expenses (e.g. hygiene, clothing, cleaning supplies, paper goods)	$
7. Other Living Expenses: _____	$
TOTAL YEARLY HOUSEHOLD EXPENSES FOR 2014:	$

Explanation for any items 1-6 above showing an amount of "0" or if the item is not applicable:

We will compare your total household resources reported on the Verification Worksheet (V6) to your expenses reported above. Your child will be notified by the Student Services Advisor if additional information will be required.

C. Certification and Signature (Handwritten Signature Required – Typed/Electronic Signature Not Accepted)

By signing below both student and parent whose information was reported on the FAFSA certify that all of the information reported is complete and correct.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

WARNING: Providing false or misleading information may be punishable by fines, jail, or both.