



UHCL - Office of Financial Aid
2016-2017
EXPLANATION OF SUPPORT - VERIFICATION

STUDENT INFORMATION:

<i>Student Last Name</i>	<i>First Name</i>	<i>M.I.</i>	<i>UHCL Student ID Number</i>
<i>If dependent: Parent Last Name</i>	<i>First Name</i>	<i>M.I.</i>	

The current information reported to the Office of Student Financial Aid reflects that you will not file a tax return and you (or your parent(s) if dependent) did not earn any wages for the 2015 tax year. Please complete the table below listing your or your parent's living expenses for 2015 and the resources used to pay these expenses. Please submit this form completed in its entirety and signed to the Office of Student Financial Aid.

Please do not leave any spaces blank. A blank space will result in an incomplete form.

Annual Expenses	Annual Amount Paid by Parent(s)	Annual Amount Paid by Student	Annual Amount Paid by Other	Source (VA, SSI, Financial Aid, friend, church, significant other, savings, family, SNAP etc.)
Rent/Mortgage <input type="checkbox"/> Check if living in someone else's household: _____	\$	\$	\$	
Utilities (phone, cable, electric, internet)	\$	\$	\$	
Food	\$	\$	\$	
Insurance (medical/car)	\$	\$	\$	
Child Care	\$	\$	\$	
Car Payment	\$	\$	\$	
Fuel, travel expenses	\$	\$	\$	
Credit Card Payments	\$	\$	\$	
Miscellaneous	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	

SIGN THIS WORKSHEET:

By signing this worksheet, I (we) certify that all the information reported on this worksheet is complete and correct. I understand that the Office of Financial Aid reserves the right to request additional information as needed. Furthermore, I understand that all completed information must be received two (2) weeks prior to the end of the semester for the semester I wish to receive aid in order to receive aid. If dependent, at least one parent must sign. **WARNING:** If you purposefully give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student Signature	Parent Signature (required if student is dependent)
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State law requires that you be informed of the following: (1) with few exceptions, you are entitled on request to be informed about the information the University collects about you by use of this form; (2) under sections 552.021 and 552.023 of the Government Code, you are entitled to receive and review the information; and (3) under section 559.004 of the Government Code, you are entitled to have the University correct information about you that is incorrect.