

Last Name:

First Name:

Support in 2021

Joe Jones

Financial Aid Office 360 Choate Avenue Buffalo, NY 14220 716.826.1200

Student ID

Name of Recipient	Type of Support in 2022	Amount of Financial Support Received 2022
Jim Jones (example)	SNAP	\$4164
	AFDC Benefits (Specify Type)	
	TANF	
	SNAP	
	Housing Assistance (Specify Type)	
	Utility Assistance (Specify Type)	
	WIC	
	WIA	
	Medicaid/SSI (Specify Type)	
	Combat Pay	
	Unemployment compensation	
	Student Aid used for living expenses	
	Alimony	
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ount of the assistance p	stance that is not listed above please provide provided. For example if your family lives with	someone who provides you room and boo
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ount of the assistance p	stance that is not listed above please provide provided. For example if your family lives with	someone who provides you room and box

Received in 2021

Total Amount of Child Support Received

Josh Jones

Received in 2021

\$5,000



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Student ID		
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Section 3: Untaxed Income

Name of Person Who had Untaxed Income in 2021	Type of Untaxed Income Received in 2021	Student Amount for 2021	Spouse Amount for 2021
Joe Jones	Money received or paid on the students behalf	\$500.00	0
	Payments to tax-deferred pension and savings plans		
	Housing, food, and other living allowances paid to members of the military, clergy		
	Veterans non-education benefits		
	Money received or paid on the students behalf		
	Other untaxed income		

Other Untaxed Income includes: Untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability benefits, black lung benefits, untaxed portions of health savings accounts from IRS Form 1040 line 25, railroad retirement benefits etc.

Do not include: items reported or excluded in the table above. In addition, do not include: extended foster care benefits, student aid, earned income credit, additional child tax credit, TANF, untaxed social security benefits, SSI, WIOA educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements, foreign income exclusion or credit for federal tax on special fuels.

Section 4: Certification and Signature - Please handwrite your signature. Typed Signatures cannot be accepted.

I certify that all information provided in this document is true, complete and accurate to the best of my knowledge. I further understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid. Also, purposely giving false or misleading information on this worksheet may lead to fines, jail sentences, or both. I authorize Trocaire College to make any change(s) necessary as a result of the updated information that I have provided.

Student Signature (Cannot be typed)	Date	Spouse Signature (if married)	Date