

**MISSOURI STATE™ UNIVERSITY**  
**Office of Student Financial Aid**

**I**ndependent

**2009-2010 Minimal Income Statement – Independent Student**

A review of your 2009-2010 Free Application for Federal Student Aid (FAFSA) indicates that your total income from all sources for 2008 appears to be unusually low. Therefore additional information is required before the Office of Student Financial Aid can determine your eligibility for student aid.

**Instructions: Complete all sections of this form, sign, and return to:**

The Office of Student Financial Aid  
Missouri State University  
901 S National Avenue  
Springfield, MO 65897

**SECTION A – STUDENT INFORMATION**

Student's Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street City State Zip

**SECTION B – LIVING INFORMATION**

1. Did you live with a relative or someone else who provided free room and board in 2008?

NO

YES Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

2. Did you live in another country in 2008?

NO

YES What country? \_\_\_\_\_

3. Did you earn income in your home country in 2008?

NO

YES How much? \$ \_\_\_\_\_ (Convert the total amount for 2008 in U.S. Dollars)

**PLEASE COMPLETE THE REVERSE SIDE**



**SECTION C – LIST OF EXPENSES AND SUPPORT FOR 2008**

**Instructions:**

- **Column A:** Write in the monthly charge from January 1, 2008, through December 31, 2009, for each of the listed expenses. If there was no charge, you must write "\$0."
- **Column B:** Write the name of the person who paid this expense.
- **Column C:** Write the amount of support\* the person named in column B paid per month from January 1, 2008, through December 31, 2009. If there was no support paid, you must write "\$0."

\*Definition of Support: Support includes money, gifts, and loans, plus housing, food, clothing, car payments or expenses, medical and dental care paid for on your behalf.

	A	B	C
Expenses	Monthly Charge from January 1, 2008, to December 31, 2008	Name of person who paid this expense	How much did this person pay from January 1, 2008, to December 31, 2008
Housing (Rent, mortgage)	\$		\$
Child Care	\$		\$
Utilities	\$		\$
Credit Card(s)	\$		\$
Medical/Dental	\$		\$
Auto (car payments, insurance, maintenance)	\$		\$
Other personal expenses (clothing, groceries, etc.)	\$		\$

**SECTION D – ADDITIONAL COMMENTS (Attach a separate sheet if necessary)**

Please provide an explanation on how you were able to meet your day to day expenses from January 1, 2008, through December 31, 2008.

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**SECTION E – SIGNATURES**

By signing this document, I certify that all information provided on this form is true, accurate, and complete.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

