

MISSOURI STATE™ UNIVERSITY
Office of Student Financial Aid

Independent

2008-2009 Minimal Income Statement – Independent Student

A review of your 2008-2009 Free Application for Federal Student Aid (FAFSA) indicates that your total income from all sources for 2007 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 2007?

- NO
 YES

If yes: Name: _____
Relationship: _____

2. Did you live in another country in 2007?

- NO
 YES

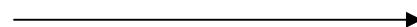
If yes, what country? _____

3. Did you earn income in your home country in 2007?

- NO
 YES

If yes, how much? \$ _____ (Convert the total amount for 2007 in U.S. Dollars)

PLEASE COMPLETE THE REVERSE SIDE



SECTION C – LIST OF EXPENSES AND SUPPORT FOR 2007

Instructions:

- **Column A:** Provide the monthly charge from January 1, 2007, through December 31, 2007, for each of the listed expenses. If there was no charge, indicate "\$0."
- **Column B:** Provide the name of the person who paid the expense.
- **Column C:** Provide the amount of support* the person named in column B paid per month from January 1, 2007, through December 31, 2007. If there was no support paid, indicate "\$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, 2007, to December 31, 2007	Name of person who paid this expense	How much did this person pay from January 1, 2007, to December 31, 2007
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, 2007, through December 31, 2007.

SECTION E – SIGNATURES

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

Student Signature: _____ Date: _____

