## UNIVERSITY OF HARTFORD

## 2016-2017 Household Resources Worksheet

The income that you have listed on the 2016-2017 FAFSA form is considered very low by federal financial aid guidelines. We are required by federal law to request additional data about your household finances so that we may understand your expenses and how your household is meeting its financial obligations. *This Worksheet must be submitted within two weeks of receipt of the request. Failure to submit these documents could result in cancellation of your financial aid awards.* 

<u>Instructions:</u> Please complete below. Do not leave any sections blank; indicate N/A or '0' if an item or box does not apply to you.

**<u>A. Student Information</u>** – Please provide only the student's information for this section.

Name					
Address	Date of Birth				
City	State	Zip Code	Phone		
B. Household Income/ need to ask for more detailed is listed below and fill in the amo	Resource Information about you	mation - Base or sources of sup	ed on the income you reporte	ed on you	r 2016-2017 FAFSA, we
Source of Income	Employer or Payer P		erson Who Received the Income		Amount Received Monthly
Student's Employment					
Parent's Employment					
Child Support Received					
Alimony Received					
Unemployment Benefits					
Social Security Benefits					
Section 8 Assistance					
Other Government Benefits					
Cash or Gifts					
Other Income					
(such as veteran's non-	-education benefits, or	housing, food an	d other allowances paid to the	military, c	lergy, and others, etc)
C. Household Expense 2015. Please note that your explain how you are meeting	expenses below <u>CAN</u>	I <mark>NOT</mark> be greate			
Expense	Average Monthl	v Amount	Expense	Ave	rage Monthly Amount
Rent/Mortgage		<u>,                                    </u>	Clothing		<u> </u>
Utilities			Transportation		
Food/Groceries			Health/Medical		
If Rent/Mortgage expenses a	bove are zero, or if t	there is anythir	ng not reflected in the table	s above,	please explain below:
D. CERTIFICATION AND	DSICNATIDE	Dry gigning = ±1-1-	rusalrahaat I (****) aanti-t-t	hat all af	the information was set - 1
on this worksheet is complet	te and correct. If the	student is a de		ıt must si	gn along with the student.
Student Signature			Date		
Required if a dependent stud	lent		Date		
200 Bloom	field Avenue, West	: Hartford, CT	06117   P: 860.768.4296	F: 86	60.768.4961