LIM COLLEGE

Office of Student Financial Services
12 East 53rd St, New York, NY 10022
Phone: 212-310-0689
Fax: 212- 750-3452

2023-2024 Low Income Form

An unusually low income was reported on your 2023-2024 Free Application for Federal Student Aid (FAFSA). To clarify your financial aid application and household situation, list and explain below the resources that were available to help you meet your living expenses in 2021. This information will be used to verify the FAFSA questions were answered correctly.
Dependent students must include parental information. (Use black or blue ink only. No cross-outs or white-outs.)

STUDENT INFORMATION

_____ _____ _____
Last Name First Name MI

_____ _____@limcollege.edu
LIM ID LIM Email

FEDERAL/STATE BENEFITS INFORMATION

At any time during 2021 or 2022, did you and/or your spouse (if independent), your parent(s) (if dependent), or anyone in your parent(s)' household receive benefits from any of the federal programs listed below? Check all that apply.

- ❑ Medicaid or Supplemental Security Income (SSI)
- ❑ Supplemental Nutrition Assistance Program (SNAP)
- ❑ Free or Reduced Price School Lunch
- ❑ Temporary Assistance for Needy Families (TANF)
- ❑ Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- ❑ Other Federal/State Benefits: _____

EXPENSE INFORMATION

Please list the following expense information for

1. Rent amount paid in 2021: $ _____
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   a. If rent amount is $0, who provided housing? *List their relationship to the person(s) whose information is being provided:* _____
2. Additional expenses paid in 2021 (such as food, transportation, utilities, etc.): $ _____

OTHER INCOME INFORMATION

List and describe below other sources of income not reported on the FAFSA. If the source of income is a person(s), list their name and relationship to the person(s) whose information is being provided. **Do not include Federal/State Benefits Information listed above.**

	STUDENT AND SPOUSE (if applicable)	PARENT(S) (if dependent)
Sources of Income in 2021	**Amount Received in 2021**	**Amount Received in 2021**
Source 1:	$	$
Source 2:	$	$
Source 3:	$	$

Certification Statement: ***Handwritten signature(s) ONLY***
By signing this form, I/we certify that all the information on this form is accurate and complete.

Student Signature:	Date:
Parent Signature (Dependent Student Only):	Date: