

Student Financial Services

## **Student Financial Services**

36 South Wabash, Suite 1200 Chicago, IL 60603-3103 Email: saic.sfs@saic.edu Voice:(312) 629-6600 | Fax :(312) 629-6601 To Submit Documents: saic.edu/sfssharefile

## 2024-2025 Low Income Statement

An exceptionally low level of household income for 2022 has been indicated on your 2024-2025 Free Application for Federal Student Aid (FAFSA). In order to complete the determination of your student aid eligibility, you must provide additional information regarding the 2022 household expenses and income for you, your spouse (if married) and your parent(s) (if you are a dependent student). Please complete this form and return it to the Student Financial Services Office.

If more space is needed, attach a separate page with the student's name and SAIC ID number at the top.

A. Student Information	
Student Name	SAIC ID Number
Phone Number	Email

## B. 2022 Actual Living Expenses

For any amount that does not apply, please list "0" (zero). Do not leave spaces blank.	Student/Spouse	Parent(s)
	Per Year	Per Year
Rent/Mortgage	\$	\$
Utilities (Gas, electric, water)	\$	\$
Food (Do not include Food Stamps)	\$	\$
Transportation	\$	\$
Other (Specify)	\$	\$
Total Expenses for 2022	\$	\$

## B. 2022 Income and Resources

For any amount that does not apply, please list "0" (zero). Do not leave spaces blank.	Student/Spouse	Parent(s)
Income earned from work (wages, salaries, tips, etc.)	Φ.	Φ.
Non Tax Filers - Provide proof of income such as W-2's, 1099's, etc.	\$	\$
Other Income – Specify:	\$	\$
Child Support Received for all Children	\$	\$
Alimony or Separate Maintenance	\$	\$
Welfare and General Assistance Benefits	\$	\$
Supplemental Security Income (SSI)	\$	\$
Social Security Benefits	\$	\$
Veterans Benefits – Specify Type:	\$	\$
Unemployment Compensation	\$	\$
Disability Benefits other than Social Security	\$	\$
Pensions or Retirements Benefits	\$	\$

(Continued on next page)

Student Name		SAIC ID Num	her	
Student Name SAIC ID Number				
B. 2022 Income and Resou	rces (continued)			
For any amount that o				
please list "0"		Student/Spouse	Parent(s)	
Do not leave space				
Housing, Food or Other Living	Allowances	\$	\$	
for Military, Clergy, etc.				
Workers' Compensation	- 2022	\$	\$	
Financial Aid refund Received i	n 2022	\$	\$	
Estimated cash received or monies paid on your behalf	☐ Loan:	\$	\$	
in 2022 that helped support	0.15			
your living expenses. Please	☐ Gift:	\$	\$	
check if funds were a:	☐ Cash Support:	\$	\$	
Total 2022 Income and Res		\$	\$	
		1		
C. Explanation of Resource	Sufficiency			
D. Certification and Signatu declare, under penalty of p	erjury, that the infor	mation on this form is	true, complete and	
ccurate to the best of my k	nowieage.			
lote: Electronic/Typed signa	atures are not accep	table.		
Student Signature		Date		
Parent Signature (Dependent S	Students Only)	Date		