CHESTNUT HILL COLLEGE

Student Financial Services **15-16 Additional Income Worksheet**

Since you and/or your parent(s)/spouse reported no income or a low income on your FAFSA, we need to verify how you and/or your family were supported during the previous tax year. Please indicate the yearly amount spent for the following necessities and indicate the source of the funding.

Student Name: _____ **CHC ID#**: _____

2014 Expenses and Funding for Student and/or Spouse

	Amount Per Year (Student)	Amount Per Year (Spouse)	Source of Funding
Housing (Rent, Mortgage)			
Food			
Utilities			
Clothing			
Health Insurance			
Spending Money			

2014 Expenses and Funding for Parent(s)

	Amount Per Year (2013)	Source of Funding
Housing (Rent, Mortgage)		
Food		
Utilities		
Clothing		
Health Insurance		
Spending Money		

2014 Other Untaxed Income for Tax Filers and Non-Filers

	Amount Per Year (Student)	Amount Per Year (Parent or Spouse)	Source of Funding
Payments to Tax-Deferred Pension and Savings			
Child Support Received			
Housing, Food, and Other Living Allowances Paid to Members of the Military, Clergy, and Others			
Veterans Noneducation Benefits			
Other Untaxed Income			
Money Received or Paid on the Applicant's Behalf			

Certification & Signature: I certify that the submitted information is true and correct to the best of my knowledge and behalf. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. I understand that purposely providing false information on this form may result in reduction or repayment of aid, fines, and/or imprisonment in this and/or future years.

Student's Signature	**Date form was signed**
Parent/Spouse's Signature (if they were required on the FAFSA)	**Date form was signed**

Please return this worksheet to:

Chestnut Hill College, Student Financial Services, 9601 Germantown Ave., Philadelphia, PA 19118 or Fax to 215-242-7705