Student ID #:_____

Date received: _____

2018 – 2019 Financial Resources Form – DEPENDENT STUDENT

Financial Aid & Scholarships Office | 231 W Sixth St Bldg. 1, Powell, WY 82435 | (800) 560-4692 or (307) 754-6158
www.nwc.edu | financialaid@nwc.edu | fax: (307) 754-6154

Student's Name	Address	Phone /Cell	SSN (last 4 digits)
Parent's Name(s)	Address	Phone/Cell	

Dear Student:

After careful review of your 2018-2019 Student Aid Report, we noted that your parent(s) reported minimal income for tax year 2016. Per Federal Student Aid Regulations, the Financial Aid Office is required to clarify how your parent(s) lived on the amounts stated in your Student Aid Report before determining your federal student aid eligibility. **Please have your parent(s) complete Sections 1 & 2 and return this form to the Financial Aid & Scholarship's Office.**

This information is required prior to the processing of your financial aid. If you have any questions regarding completion of this form, please contact our office at (307) 754-6158 or financialaid@nwc.edu .

SECTION 1 – Parent Financial Resources (*amounts*)

PARENTS: Please indicate **ANNUAL gross amounts from all sources of INCOME in 2016**. Complete all questions with at least a $0 dollar amount. Do not leave any blanks.

	Monthly	**Annual**
1. Parent(s): Wages	$_____	$_____
2. Parent(s): Unemployment	$_____	$_____
3. Parent(s): Worker's Compensation	$_____	$_____
4. Parent(s): Vocational Rehabilitation	$_____	$_____
5. Parent(s): Child Support PAID	$_____	$_____
6. Parent(s): Child Support RECEIVED	$_____	$_____
7. Parent(s): Social Security	$_____	$_____
8. Parent(s): Financial Aid/Scholarships	$_____	$_____
9. Parent(s): TANF	$_____	$_____
10. Parent(s): SNAP/Food Stamps	$_____	$_____
11. Parent(s): Money received, or paid on your behalf (e.g., bills)	$_____	$_____
12. Parent(s): Other financial resources: _____	$_____	$_____

Continued →

Northwest College
WYOMING

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Date received: _____

SECTION 2 – Parent Financial Resources (*explanation*)

PARENTS: In addition to the figures you recorded on side 1, please explain in the narrative space below (or on a separate sheet of paper), how you paid for family **living expenses in 2016**. Be sure to include all sources of income and resources such as: annual child support, food stamps, student financial aid, health care assistance (Medicaid), rental assistance, monetary gifts from family/friends…

Parent Signature: _____ Date: _____

WAIT!

Parent: Did you fully complete this form, including signature? We will return any incomplete or unsigned forms for correction and it will delay your dependent's financial aid process. If you have questions concerning this form please contact the Financial Aid Office.