

9000 Babcock Blvd. Financial Aid Office, SC 109 Pittsburgh, PA 15237 412-536-1125 Fax: 412-536-1072

## PARENT LOW INCOME QUESTIONNAIRE FORM 2019-20

Student Name:\_\_\_\_\_\_SS# or ID:\_\_\_\_\_

Home Phone Number: Cell Phone Number:

Because your parents indicated that they had little/no income in 2017, the Financial Aid Office requests that your parents complete this form. This information will be used to justify your family's living arrangements for the year **2017**. If applicable, please provide documentation that substantiates your income.

## **PARENT**(s): Please complete the following:

1. Please explain your housing situation for 2017. (Ex: living with your family, friend, etc.)

2. How did you purchase food for **2017**? (Ex: your family, cash, food stamps, etc.)

3. What type of transportation did you use for 2017 (Ex: bus, car, etc.) and who paid for your transportation?

4. From what sources did you receive income, including wages, allowances, and stipends in **2017**? (Ex: social security, public assistance, work, family, unemployment compensation, etc.)

5. How much did you receive from these sources in <b>2017</b> ?			
Source:	Amount: <u>\$</u>	How Often:	
Source:	Amount: <u>\$</u>	How Often:	
Source:	Amount: <u>\$</u>	How Often:	
Parent Signature:		Date:	