

E. Other untaxed income

List the amount of other untaxed income not reported and not excluded elsewhere on this form. **Include** items such as disability, SSD/SSDI, workers' compensation, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc. **DO NOT include** student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Name of recipient	Type of other untaxed income received	Total amount of other untaxed income received in 2017
		\$
		\$

F. Money received or paid on the student's behalf

List any money received or paid on the student's (and spouse's, if applicable) behalf (e.g., payment of a bill) not reported elsewhere on this form.

Purpose (e.g., cash, rent, books, cell phone bill, car insurance, etc.)	Source of payment	Total amount received in 2017
		\$
		\$

G. Additional information

So that we may fully understand the student's family's financial situation, please provide below information about any other resources, benefits, and other amounts received by the student and any members of the student's household. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office, and include such things as federal veterans education benefits, military housing, low-income housing, SNAP, Medicaid, TANF, WIC, Supplemental Security Income, etc.

Name of recipient	Type of Benefit (e.g., veterans, military, low-income, Medicaid, WIC, SSI, etc.)	Total amount received in 2017 (if known)
		\$
		\$

STATEMENT OF SUPPORT

Please explain IN DETAIL how your family supported itself in 2017. Please include whether or not you lived with someone else who helped support you/your family, or received assistance not otherwise listed on this form. Because FAFSA information requires 2017 income information which may not reflect your current situation, please also explain IN DETAIL how your family is supporting itself **now**, including any changes in employment, benefits, or other income since 2017. You may attach a separate sheet if needed.

CERTIFICATIONS AND SIGNATURES

By signing this worksheet, we certify that all of the information reported is complete and correct. We also acknowledge that we have read and agree to comply with all verification policies as stated by EWC in the College Catalog and on the EWC website. **Failure to submit information in a timely fashion may result in the application being filed as inactive** with no further consideration and no federal aid for the academic year. Student and spouse (if applicable) must sign:

Student's signature

Date

Spouse's signature

Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.