Low Income Form 2014-2015

Either you (if an independent student) or your parent (if a dependent student) reported income below the Poverty Guidelines as stated by the Department of Health and Human Services (HHS) for 2014 on the FAFSA, and did not report any untaxed income on the Verification Worksheet. According to the 2014 Poverty Guidelines for the 48 Contiguous States and the District of Columbia, a single individual must have income totaling $11,670 to subsist at the poverty level.

Please review the chart below and consider what sources of income you may not have reported previously. Any cash support or money paid on either you or your parent’s behalf is considered untaxed income and must be reported on the Other Income line. If you live with a friend or relative, this is considered in-kind support and the estimated value of the room and board must be reported on the Non-spouse Contributing Member line.

We cannot continue processing your financial aid until this form is returned.

2014 HHS Poverty Guidelines

<table>
<thead>
<tr>
<th>Persons in Family Unit</th>
<th>48 Contiguous States and D.C.</th>
<th>Alaska</th>
<th>Hawaii</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$11,670</td>
<td>$14,580</td>
<td>$13,420</td>
</tr>
<tr>
<td>2</td>
<td>15,730</td>
<td>19,660</td>
<td>18,090</td>
</tr>
<tr>
<td>3</td>
<td>19,790</td>
<td>24,740</td>
<td>22,760</td>
</tr>
<tr>
<td>4</td>
<td>23,850</td>
<td>29,820</td>
<td>27,430</td>
</tr>
<tr>
<td>5</td>
<td>27,910</td>
<td>34,900</td>
<td>32,100</td>
</tr>
<tr>
<td>6</td>
<td>31,970</td>
<td>39,980</td>
<td>36,770</td>
</tr>
<tr>
<td>7</td>
<td>36,030</td>
<td>45,060</td>
<td>41,440</td>
</tr>
<tr>
<td>8</td>
<td>40,090</td>
<td>50,140</td>
<td>46,110</td>
</tr>
</tbody>
</table>

For each additional person, add $4,060 $5,080 $4,670.

Income and In-kind Support

Enter zero or N/A if not applicable

$______ Income from work for 2013
$______ Financial Aid Awards for 2013
$______ Yearly Unemployment in 2013
$______ Child Support received in 2013
$______ Pension or Retirement Payments
$______ Veterans Non-education benefits
$______ Welfare, DHHR and TANF benefits in 2013
$______ SNAP Benefits for 2013
$______ Subsidized housing received in 2013
$______ Social Security Benefits received in 2013, including Disability

Yes or No: Did you receive Medicaid or some form of Government Subsidized Healthcare

$______ Other Income Source: ____________________________
$______ Non-spouse Contributing Member
(include letter) Relationship: ____________________________

I understand that if I do not report any income or in-kind support on this form, the Financial Aid Office reserves the right to use the appropriate dollar amount from the Poverty Guidelines for my family size as untaxed income in my needs analysis.

Student Signature ____________________________ Student ID ______________
Student Name ________________________________

Parent Signature ______________________________ Date ______________
Parent Name ________________________________

Return completed form to:
Blue Ridge Community and Technical College
Office of Student Financial Aid
13650 Apple Harvest Drive
Martinsburg, WV 25403
304/260-4380 Fax 304/260-4376
www.blueridgectc.edu/financial_aid finaid@blueridgectc.edu