Lander University Financial Aid Office 320 Stanley Avenue, Greenwood, SC 29649

320 Stanley Avenue, Greenwood, SC 29649
Email: finaid@lander.edu • Web: www.lander.edu/finaid
Phone: (864) 388-8340 • Fax: (864) 388-8811

2022-2023 Low Income Verification Request – Parent(s)

	First Name MI	Lander ID (La	#)
Dear Student:			
appears unusually low. Pleas	ted on your 2022-2023 Free App e have your parent provide a det d, clothing, shelter, utilities, trans	ailed explanation of how	
oills paid on their behalf (or for s not limited to) money, gifts,	ar amount of any income your par their dependents) by another per housing, food, clothing, car paym	erson or agency in 2020. nents or expenses, medic	This includes (bu
care, and payment of college	costs. Do not include financial a	id. De suie to list the so	urce of income.
Expense	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government agency, etc.)	FAO use only: Count as Untaxed? Y or N
	Amount Paid on Parent's Behalf for 2020	Source (Parent, friend, government	FAO use only: Count as Untaxed?
Expense	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government	FAO use only: Count as Untaxed?
Expense	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government	FAO use only: Count as Untaxed?
Expense Housing Food	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government	FAO use only: Count as Untaxed?
Expense Housing Food Clothing Car payments or expenses Medical or dental expenses	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government	FAO use only: Count as Untaxed?
Expense Housing Food Clothing Car payments or expenses Medical or dental expenses Payment of college costs	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government	FAO use only: Count as Untaxed?
Expense Housing Food Clothing Car payments or expenses Medical or dental expenses Payment of college costs Other expenses paid	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government	FAO use only: Count as Untaxed?
Expense Housing Food Clothing Car payments or expenses Medical or dental expenses Payment of college costs	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government	FAO use only: Count as Untaxed?
Housing Food Clothing Car payments or expenses Medical or dental expenses Payment of college costs Other expenses paid	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government	FAO use only: Count as Untaxed?
Expense Housing Food Clothing Car payments or expenses Medical or dental expenses Payment of college costs Other expenses paid	Amount Paid on Parent's Behalf for 2020 (1/1/20-12/31/20) for each	Source (Parent, friend, government	FAO use only: Count as Untaxed?

DATA ENTRY		COUNSELOR REVIEW	
RRAAREQ	xxLOWP = N CNSLV = N	Refer to the SFA Application and Verification Guide for how to count each expense based on source. Money received or paid on parents' behalf does not have to be included on FAFSA but is needed to document income source	
Initials/date		RNAVRxx and Verf Review Worksheet completed	
Fwd to Counselor		Calc need and update ROAUSDF efc and trans	
date			
		RRAAREQ	S = Satisfied, eligible
		RHACOMM	
FSA AVG Guide Ch. 1 and 2		CNSLR Initials/date	