



## Lander University Financial Aid Office

19CLER

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### Confirmation of Housing/Food/Other Living Allowance

#### Paid to Members of Clergy, and Others in 2019

<b>Student's Last Name</b>	<b>First</b>	<b>MI</b>	<b>Lander ID (L#)</b>
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Documents that you provided indicate that one of your household members is a member of the clergy. Federal regulations require that we confirm any untaxed income received such as housing, food, and other living allowances paid from January 1, 2019 – December 31, 2019. You must include any cash payment, as well as the cash value of benefits. For example, if a parsonage is provided, what is the fair value of rent for a year to live there?

Please provide the following information:

Name of Clergy Member	Relationship to Student	Amount of housing/food/other living allowances paid to member of clergy for 2019 (Jan. 1st-Dec 31st). Include cash payment and cash value of benefits.

<b>Student's Signature (Required)</b>	<b>Phone #</b>	<b>Date</b>
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<b>Parent's Signature</b>	<b>Phone #</b>	<b>Date</b>
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#### Financial Aid Office Use Only

DATA ENTRY	Financial Aid Use Only	COUNSELOR REVIEW	
RRAAREQ	N=Pending Review	Update RNAVRxx and Verf Review Worksheet	
Initials/date		Calc Need	
Fwd to Counselor date		Update ROAUSDF etc and trans	
		RRAAREQ	xxCLER CORRP = E
		Update RPAAWRD if already packaged	