



**FINANCIAL AID OFFICE
2023-2024 Student Status**

CAR PMTS/INSURANCE	\$	
GROCERIES	\$	
CHILD CARE	\$	
<i>Total Expenses</i>		

4. Were you claimed by your parent(s) on the 2021 IRS Tax Return? YES NO

5. Was your dependent claimed by anyone other than you on their 2021 IRS Tax Return? YES NO

A. If YES, list the name of that person and their relationship to you: _____

6. CERTIFICATION & SIGNATURE:

By signing this form, I certify the following:

- All supporting documentation has been provided.
- I understand that this request will not be reviewed if incomplete.

I certify that the information provided on this form and in the accompanying documentation is complete and correct. I agree, if requested, to provide additional documentation to support the information herein.

Print Student Name

HCC ID # or SSN (last 4 digits)

Student Signature

Date

**WARNING! If you purposely give false or misleading information, you may be fined, imprisoned, or both.
Note: Please allow four weeks for processing.**

<u>For FAO Use Only:</u>	
Date Received: _____	Reviewed By: _____
Decision: Approved Denied	
Notes: _____	

