



Upon reviewing your 2019-2020 FAFSA results, we must verify your reported earnings from work under a cooperative education program, as a part of 2017 Additional Financial Information. Please provide us with the information requested below **within 30 (thirty) days** to finalize your eligibility for aid. **Failure to comply may jeopardize your award for the year.**

### STUDENT INFORMATION

Student's Name \_\_\_\_\_ Student ID# \_\_\_\_\_  
Last First MI

Permanent Address \_\_\_\_\_  
Street Address City State Zip

SSN (optional) \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

### 2017 ADDITIONAL FINANCIAL INFORMATION

Student/Spouse	Calendar Year 2017	Parent(s)
\$	Earnings from work under a cooperative education program offered by a college. (As it relates to questions 44f and 93f on FAFSA)	\$
\$	◀ TOTAL TOTAL ▶	\$

### Signature(s) REQUIRED

I (We) hereby affirm that all information reported on this form and any attachment hereto is true, complete, and accurate to the best of my (our) knowledge. I (We) understand that if I (we) receive federal student aid based on incorrect information, I (we) will need to repay it; I (we) may be required to pay fines and fees.

Student \_\_\_\_\_ Date \_\_\_\_\_

Parent (if dependent) \_\_\_\_\_ Date \_\_\_\_\_