



2017-2018 Ability to Support

Independent Student

Section 1: Clarification is needed for the total number of people you will be supporting for the 2017-18 aid year. Your reported 2015 income does not appear adequate to support basic needs; please explain how living expenses were met. SUPPORT means that you provide more than 50% of all living expenses for the individuals included in the household size reported, and will continue to do so from July 1, 2017 through June 30, 2018.

Student's Last Name	First Name	M.I.	MiraCosta ID Number
Street Address (include apt. no.)			Date of Birth
City	State	Zip Code	Email Address
Phone Number (include area code)			Alternate or Cell Phone Number

Section 2: You must answer all 3 questions regarding 2015:

Did you receive *free housing* from a parent, friend, relative, or from someone in which you have a relationship? ___ YES ___ NO

Did you receive *free groceries/food* from a parent, friend, relative, or from someone in which you have a relationship? ___ YES ___ NO

Did you receive *free child care* from a parent, friend, relative, or from someone in which you have a relationship? ___ YES ___ NO

Section 3: List all forms of expenses incurred by you in 2015. If someone else paid your living expenses, please estimate the financial value of the in-kind support that you received in the table below:

EXPENSES	\$ Value (Jan 2015- Dec 2015)	How paid/ How split
Example: Housing	\$200 x 12 = \$2,400	Lived with boyfriend for 12 months in 2015. He paid rent of \$400 a month for 2 people. My share was \$200 a month.
Rent/ mortgage payments	\$	
Car payment	\$	
Apartment/ home insurance	\$	
Food/ groceries	\$	
Gasoline, oil, car repairs	\$	
Out of pocket medical expenses	\$	
Clothing	\$	
Child care expenses	\$	
All utility expenses (gas, electric, cable, water, cell phone, etc.)	\$	
Entertainment expenses	\$	
Miscellaneous/ personal expenses (toiletries, etc.)	\$	

Section 4: List all forms of income/resources received by you in **2015**. Resources can be monetary gifts or monetary transfers made to you.

INCOME/ RESOURCES	January 2015 – December 2015
Income from work (gross)	\$
Spouse income from work (gross)	\$
Resources from parent(s)	\$
Resources from other relatives	\$
Resources from boyfriend/girlfriend	\$
Resources from partner/life partner	\$
Financial aid received	\$
Unemployment or disability benefits	\$
Child support received	\$
Business, rental, or farm income	\$
Trust fund income	\$
Interest/dividend income	\$
Social Security benefits	\$
Public assistance benefits (TANF)	\$
Subsidized housing	\$
Food stamps	\$
Veterans benefits	\$
Other (specify source)	\$

Please provide any additional information regarding your situation that will help with our review:

Section 4:

All of the information provided on this form is true and correct to the best of my knowledge. If requested, I agree to provide MCC Financial Aid Office with documentation of the information given on this form. I give MCC Financial Aid Office permission to correct my 2017-18 FAFSA with appropriate information from this form. I understand that if I purposely give false or misleading information to be used on my ISIR, I may be subject to a \$20,000 fine, a prison sentence, or both. I further understand that if this form is incomplete, it will be returned and my financial aid will be DELAYED.

Student Signature: _____ Date: _____

Please note that clarification of the above information may result in a request for additional documents in order to complete your file.