

Student # _____

EASTERN MICHIGAN UNIVERSITY
OFFICE OF FINANCIAL AID
 403 Pierce Hall, Ypsilanti, MI 48197
2007 – 2008 Worksheet C – Income Exclusions

				XXX-XX-
Last Name	First Name	M.I.	Last 4 Digits of Social Security #	
Address	City	State	Zip	Telephone Number

Dependent Students - List the family members in your parent(s)' household. Include:

- Yourself and the parent(s), even if you don't live with your parents. Include your **stepparent** if your parent has remarried.
- Your parent's **dependent children** if your parent(s) will provide more than half of their support from 7/1/07 – 6/30/08.
- Other people only if they live with your parent(s) and receive more than half of their support from your parent(s).

Independent Students - List the family members in your household. Include:

- Yourself and your spouse (if you have one)
- Your **dependent children/stepchildren** if you will provide more than half of their support from 7/1/07 – 6/30/08.
- Other people if they now live with you, you (and/or your spouse) provide more than half of their support, and you (and/or your spouse) will continue to provide more than half of their support from 7/1/07 – 6/30/08.

Attach a separate page if you need more space

FULL NAME	DATE OF BIRTH (mm/dd/yy)	RELATIONSHIP TO YOU	NAME OF COLLEGE*
1. (Your name)	/ /	Self	Eastern Michigan University
2.	/ /		
3.	/ /		
4.	/ /		
5.	/ /		
6.	/ /		

* Provide the name of the college if the person listed will attend, **at least half time** (6 credit hours or more) between 7/1/07 and 6/30/08, a program that leads to a college degree or certificate.

Student Income Exclusions	FAFSA Worksheet C Income Exclusions	Spouse or Parent Income Exclusions
\$	Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040-line 50 or 1040A-line 31.	\$
\$ _____ XXXXX _____	Child support paid due to divorce or separation. Don't include support paid for children that you have listed on the reverse side of this form as part of your household. Documentation required: Statement from Friend of the Court or copy of divorce decree/separation.	\$
\$	Taxable earnings from Federal or State Work-Study programs.	\$
\$	Students grant, scholarship, fellowship and assistantship aid that was reported to IRS as taxable income.	\$

 Student Signature

 Date

 Parent Signature (required for dependent students)

 Date