



**FAMILY INCOME & RESOURCE
WORKSHEET
2026-2027 Academic Year**

Student's Name: _____ ID: _____

Based on information reported on the 2026-2027 FAFSA (Free Application for Federal Student Aid) we are requesting additional clarification of your household income and/or financial resources. In the space provided below, please include all information regarding any wages, resources, benefits, and other income received by the student and/or parent(s). This may include items that were not required to be reported on the FAFSA.

RESOURCE	ANNUAL AMOUNT RECEIVED IN 2024	RESOURCE	ANNUAL AMOUNT RECEIVED IN 2024
Student income from work	\$ _____	Bills paid on your behalf ("in-kind" or family support)	\$ _____
Parent income from work	\$ _____	AFDC/TANF/General Relief	\$ _____
Retirement/pension income	\$ _____	Social Security income	\$ _____
Child Support Received	\$ _____	Alimony	\$ _____
Veterans benefits	\$ _____	Unemployment benefits	\$ _____
SNAP benefits	\$ _____	Other (_____)	\$ _____
Other (_____)	\$ _____	Other (_____)	\$ _____

In the space below, please provide any other details about your household income either not covered in the table above, or that needs further explanation.

CERTIFICATION AND SIGNATURE

By signing this form, I certify all information reported on this form is complete and correct. **Digital signatures are not accepted.**

Student Signature _____ Date: _____

Parent/Student's Spouse Signature _____ Date: _____

Return this completed form to:
Financial Aid Office • Framingham State University • McCarthy Center, 5th Floor • 100 State Street
Framingham, MA 01701 • Phone: (508) 626-4534 • Fax: (508) 626-4598 financialaid@framingham.edu