



# FRIENDS UNIVERSITY

Office of Financial Aid

## Financial Aid Zero Income Statement 2019-2020

N00

Student's Last Name

First Name

Student ID

( )

E-mail Address

Phone Number

**IMPORTANT INFORMATION:** You indicated on your 2019-2020 Free Application for Federal Student Aid (FAFSA) that you earned zero income. **For the individual that earned zero income, you will need to write a statement below as to how you supported yourself without earning any income in 2017.** PLEASE PRINT your statement on the space provided below or TYPE your statement and attach it to this form. Your signature/date will be required on all typed statements.

Please check mark box which individual earned zero income: Student:  Parent:  Spouse:

In 2017, I state that I earned zero income. I, \_\_\_\_\_ was

(Print first/last name)

financially supported by (please describe below):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student's Signature

Date

Parent/Spouse Signature

Date

**Digital signatures cannot be accepted.**

If you have any questions, please call (316) 295-5200 or (800) 794-6945, ext. 5200. You may submit this form in person, fax (316) 295-5703 or mail. Please be sure and encrypt any email that contains personal identifiable information (PII). We are unable to accept PII that has not been encrypted.

If you purposely give false or misleading information, you may be fined \$20,000, sentenced to jail or both.