



North Central College  
**Office of Financial Aid**  
 30 N. Brainard Street  
 Naperville, IL 60540  
 Phone: 630-637-5600  
 FAX: 630-637-5608  
 Email : finaid@noctrl.edu

**2018-19**  
**UNTAXED INCOME AND BENEFITS**

**Student's Full Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
 (Please Print Clearly)

**PLEASE NOTE: Dependent Students must complete both the student's and parent(s)' sections below. Do not leave any item blank—enter "0" (zero) if an item is not applicable.**

**Comments:** \_\_\_\_\_

Other Untaxed Income and Benefits	Student (& Spouse)	Parent(s)
Child Support <b>Paid in 2016</b>	\$	\$
Child Support <b>Received in 2016</b>	\$	\$
Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits)	\$	\$
Veterans' non-education benefits such as Disability, Death Pension, DIC and/or VA Educational Work-Study allowances	\$	\$
Combat pay or special combat pay (Only the amount that was taxable and included in the AGI. Do not include what was reported on the W-2, box 12, code Q)	\$	\$
Money received or paid on your behalf in <b>2016</b> (e.g., bills) <b>(Do not include child support.)</b>	\$	\$
Any other untaxed income and benefits, not reported elsewhere, such as Workers' Compensation, Disability	\$	\$
Student grant, scholarship, fellowship aid and assistantships, including AmeriCorps benefits (awards, living allowances and interest accrual payments) that were reported to the IRS in your (or your parents') adjusted gross income.	\$	\$
Did your family receive any Food Stamp Benefits (SNAP) in <b>2016 or 2017?</b> <b>If yes, please provide supporting documentation.</b>	\$	\$

**Student's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Spouse's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Father's (Step-father's) Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Mother's (Step-mother's) Signature** \_\_\_\_\_ **Date** \_\_\_\_\_