



Ogeechee Technical College

Office of Financial Aid
One Joe Kennedy Blvd
Statesboro, GA 30458
Phone: (912) 681-5500 ~ Fax: (912) 486-7403
Email: fa@ogeecheetech.edu

Zero/Low Income
Resources
Worksheet
Form: **ZLIN17**
Aid year: 2017-2018

Please *Type* or *Print* clearly.

Student Information:

_____	_____	_____	_____
Last Name	First Name	MI	Telephone Number
_____	_____	_____	_____
Social Security Number	OTC – Student ID Number	Date of Birth	

Federal Student Aid Programs: Your application was selected for review in a process called “Verification.” In this process, the Office of Financial Aid will be comparing information from your application with your (and your parent(s), if a dependent student or your spouse, if an independent student) financial documents. We are required to review your FAFSA information under financial aid program rules (34 CFR, Part 668). The law states we have the right to ask you for this information before awarding Federal Aid. If there are differences between your application information and your financial documents, corrections to your FAFSA may be required.

So that we can fully understand the student’s family’s financial situation, please provide below information about any resources, benefits, and other amounts received by the student and any members of the student’s household (*parents if dependent student*).

Benefit Received	Monthly Amount of Benefit	Benefit Received	Monthly Amount of Benefit
TANF		Veterans Benefits	
Food Stamps		Subsidized Housing (Section 8)	
Women/Infants/Children WIC		Child Support Received	
Workforce Investment Act (WIA)		Social Security	
Cash Payments: Explain _____		Supplemental Social Security (SSI)	

(Check all that apply) During 2015, I, _____ was incarcerated; _____ lived with parents/relative; _____ lived with other party (Name of Party) _____ & (Relationship) _____

Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct. The student (and one parent whose information was reported on the FAFSA, if a dependent student) must sign and date.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Parent's Signature (Required, if Dependent Student)

Date

Do not mail this form to the Department of Education. Submit this worksheet to the Office of Financial Aid!

As set forth in its student catalog, Ogeechee Technical College does not discriminate on the basis of race, color, creed, national or ethnic origin, sex, religion, disability, age, political affiliation or belief, genetic information, veteran status, or citizenship status (except in those special circumstances permitted or mandated by law). The following person(s) has been designated to handle inquiries regarding the non-discrimination policies: Title IX Coordinator, Office 193, Joseph E. Kennedy building, 912.871.1885, titleix@ogeecheetech.edu; ADA/Section 504 Coordinator, Office 189, Joseph E. Kennedy building, 912.486.7211, adacoordinator@ogeecheetech.edu; One Joseph E. Kennedy Boulevard, Statesboro, GA 30458. Ogeechee Technical College is a unit of the Technical College System of Georgia. Revised 5/8/17