NORTHEAST
MISSISSIPPI COMMUNITY COLLEGE

Low Income Worksheet

Name: _____

SS#: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS CAREFULLY:

1. What is the monthly cost of housing and utilities? $_____ (x 12 = _____)
2. From what income source is this paid? _____

   _____
3. What is the approximate monthly cost of food? $_____ (x 12 = _____)
4. What is the monthly value of food stamps (if received)? $_____ (x 12 = _____)
5. From what income source are food cost paid? $_____
6. From what income source are car payments made? _____

_____

***NOTE: THESE QUESTIONS MUST BE ANSWERED SINCE YOU SHOWED NO INCOME OR A VERY LOW INCOME ON YOUR PELL GRANT FORMS. WE CANNOT PROCESS YOUR PELL GRANT UNTIL YOU ANSWER THESE QUESTIONS.**

Signature: _____ Date: _____