



Proof of Income Worksheet

RETURN THIS FORM TO: Multnomah University Financial Aid Office | 8435 NE Glisan Street | Portland, OR 97220
Phone: 503.251.5335 | Fax: 503.445.5199 | Email: finaid@multnomah.edu

Student Name _____

Student ID _____

When reviewing your 2022-2023 FAFSA, we noted that a low or zero 2020 income was reported by you or your parent(s). The purpose of this form is to assist the Financial Aid Office in the verification of how basic needs of your household were met during 2020.

Please specify if this form is being used to explain the income of the:

- ☐ Independent Student
- ☐ Parent of a Dependent Student

Source of Income	Estimated Monthly Amount

Estimated Monthly Expenses (Rent/Mortgage, Food/Clothing, Medical, etc...)	Estimated Monthly Amount

Certification of Application

I certify that the information in this application is true and complete to the best of my knowledge.

Student's Signature

Date

Parent's Signature (if dependent)

Date

Questions? Call or text Multnomah University Financial Aid
503.251.5335