

**STUDENT-FAMILY FINANCIAL QUESTIONNAIRE
REQUEST FOR APPLICATION FEE WAIVER**



Office of Undergraduate Admissions
320 Student Services Building
Knoxville, TN 37996-0230

STUDENT INFORMATION (Please print)

A. Student's Name _____ SSN _____ - _____ - _____

B. Student Lives With: Father ___ Stepmother ___ Mother ___ Stepfather ___ Legal Guardian ___
Self ___ Other Relative ___ Spouse (Married) ___

C. Student's Income: Veteran Benefits \$ _____ Summer Work \$ _____
Social Security (monthly) \$ _____ Other (specify source) \$ _____

Student's Signature _____ Date _____

**PARENT OR GUARDIAN INFORMATION (To be completed by parent/guardian or head of household)
(Please print)**

<p>A. Father/Male Head of Household</p> <p>Name _____ Age _____</p> <p>Employed: Y ___ N ___ Unable to Work ___</p> <p>Employer _____</p> <p>Gross Weekly Pay \$ _____</p> <p>Number of dependent children you will claim in the current year as Federal Tax Exemptions _____</p>

<p>B. Mother/Female Head of Household</p> <p>Name _____ Age _____</p> <p>Employed: Y ___ N ___ Unable to Work ___</p> <p>Employer _____</p> <p>Gross Weekly Pay \$ _____</p> <p>Number of dependent children you will claim in the current year as Federal Tax Exemptions _____</p>

C. OTHER FAMILY INCOME RECEIVED (average monthly amounts)

Social Security \$ _____ Veteran Benefits \$ _____ Unemployment \$ _____

Retirement \$ _____ Savings/Assets \$ _____ Public Assistance/Welfare \$ _____

Food Stamps \$ _____ Child Support \$ _____ Other \$ _____ (please indicate below the sources of other income _____)

THE INFORMATION PROVIDED IS TRUE AND COMPLETE TO THE BEST OF OUR KNOWLEDGE.

Signature of Parent or Head of Household _____

Date _____