STUDENT-FAMILY FINANCIAL QUESTIONNAIRE REQUEST FOR APPLICATION FEE WAIVER



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

Date

STUDENT INFORMATION (Please print)	
A. Student's Name	
B. Student Lives With: Father Stepfather Moth	ner Stepmother Legal Guardian ouse (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 con (Please print)	mpleted by parent/guardian or head of household)
A. Father/Male Head of Household	B. Mother/Female Head of Household
Name Age	Name Age
Employed: Y N Unable to Work	Employed: Y N Unable to Work
Employer	Employer
Gross Weekly Pay \$	Gross Weekly Pay \$
Number of dependent children you will claim in the current year as Federal Tax Exemptions	Number of dependent children you will claim in the current year as Federal Tax Exemptions
C. OTHER FAMILY INCOME RECEIVED (average m	onthly amounts)
Social Security \$ Veteran Benefits \$	Unemployment \$
Retirement \$ Savings/Assets \$ Pul	blic Assistance/Welfare \$
Food Stamps \$ Child Support \$ O	ther \$ (please indicate below the sources of
other income	
THE INFORMATION PROVIDED IS TRUE AND CO	

Signature of Parent or Head of Household