



STUDENT LEGAL NAME (exactly as printed on your government-issued photo ID)		
Last/Family/Sur name(s)	First/Given name(s)	Middle name(s)

**B. 2015 Untaxed Income** *(continued)*

	TYPE OF OTHER UNTAXED INCOME	STUDENT	PARENT
<p><b>Money received or paid on the student's behalf.</b>                      List any money received or paid on the student's behalf (e.g., payment of student's bills) and not reported elsewhere on this form. Enter the total amount of cash support the student received in 2015. Include support from a parent whose information was not reported on the student's 2016–2017 FAFSA, but do not include support from a parent whose information was reported.                      For example, if someone is paying rent, utility bills, etc., for the student or gives cash, gift cards, etc., include the amount of that person's contributions <b>unless the person is the student's parent whose information is reported on the student's 2016–2017 FAFSA.</b> Amounts paid on the student's behalf also include any distributions to the student from a 529 plan <i>owned by someone other than the student or the student's parents</i>, such as grandparents, aunts, and uncles of the student.</p>		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

**C. Student/Parent Signatures**

By signing this worksheet, we certify that all of the information reported above is complete and correct. At least one parent must sign.

Student's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's name (please print) \_\_\_\_\_

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

**Return completed form to:**

Student Financial Services Office, Harvard Extension School, 51 Brattle Street, Cambridge, MA 02138-3722

**or fax it to:**

(617) 495-2921