



2015 – 2016 Low Income Statement

Student Name _____ Student ID # _____ Phone # _____

Please fill out the 2014 income statement below. When completed, this worksheet should show how you were able to support yourself and/or your family for 2014. ***If you are a dependent student, you must include parental information.*** Please complete each section of this form. Incomplete documents will NOT be accepted by our office.

Please Provide ALL sources of income for 2014

Student and/or Spousal Income	<u>Sources of Income</u> <i>Please Circle all that apply</i>	Parent Income (dependent students)
2014		2014
	Earnings from all jobs (include cash paying jobs)	
	Financial Aid Received	
	Social Security and/or Supplemental Security Income (SSI)	
	CalWorks, TANF, CalFresh	
	Child Support received	
	Alimony/Palimony received	
	Unemployment and/or Disability Compensation	
	Withdrawals from savings, retirement, trust accounts	
	Cash received from family/friends	
	Bills paid by someone else on your behalf	
	Support other than cash or bills paid on your behalf	
	All other income received not listed above	

If you had no income source for the 2014 tax year please write an explanation as to how you were able to meet your needs for; **rent, food, utilities (electric, telephone, water), clothing & essentials**. Attach additional paper if needed.

As certified by the signatures below, all the information provided by others or myself is true and complete to the best of my (our) knowledge. I understand that the Office of Financial Aid may request additional documentation to verify the above information. **If you purposely give false or misleading information on this worksheet, you will be reported to the Department of Education. You may be fined, sentenced to jail, or both.**

Note: If you are a dependent student, you and your parent(s) must sign this form.

Student _____ Date _____
 Parent _____ Date _____

Attn: Faxed copies will not be accepted. Originals must be submitted