## Financial Aid Office & Scholarship Services 10440 Black Mountain Road K1-312 · San Diego, CA 92126 · 619-388-7864 phone · 619-388-7910 fax

## 2017–2018 Income and Expense Form (DOC # H2)

Your 2017–2018 Free Application for Federal Student Aid (FAFSA)/California Dream Act Application has been selected for review in a process called verification. The law says that before awarding Federal/State Student Aid, we may ask you to confirm the information you and your parents reported on your FAFSA/California Dream Act Application. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA/California Dream Act Application with the information on this worksheet and with any other required documents. If there are differences, your FAFSA/California Dream Act Application information may need to be corrected. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

A. Student's Information

Student's Last Name Student's First Name Student's M		Student's M.I.	Student's ID		
Student's S	Street Address (in	clude apt. no.)		Student's D	Date of Birth
City	y State Zip Code		Zip Code	Student's Email Address	
Student's H	Home Phone Num	nber (include area code)		Student's	Alternate or Cell Phone Number
B. Red	ceipt of Ur	ntaxed Income			
	of untaxed inco	me during 2015. [DEPENDENT STUD	DENT household as defined on pa	ge 2]  school, I will provi	will provide documentation of the receipt ide documentation of the receipt of
C. Inc		UNTAXED & TAXABL		•	
any u	intaxed income (e		llowance, disability income, Social		s. Include income from tax returns and list etc.) and earnings or income not reported
	2015 Sources of Money				ANNUAL AMOUNT January 2015 – December 2015
	2013 Sources of Money				January 2015 – December 2015
	Т			Total	
D. Exp	oense Veri	fication		_	
		2015 Expense Ve	erification		2015 MONTHLY AMOUNT
1. 1	Mortgage/Rer	nt			
2. ا	Utilities (i.e. G	as & Electric, phone, water, e	etc.)		
3. I	Food & Clothi	ng			
4.	Transportatio	n (i.e. car payment, maintena	nce, gas, insurance, etc.)		
5. 0	Other (i.e., chi	ld care, medical, etc)			
			MONTHLY	SUBTOTAL	
	2015 ANNUAL EXPEN				

<ol> <li>In 2015, where did you (the parents) live?</li> <li>In 2015, did a friend/relative give you (the parents)</li> </ol>	☐ W/ FRIEND OR RELATIVE ☐ ON YOUR OWN onts) money for rent or pay rent on your behalf? ☐ YES ☐ NO
	e, explain the special circumstances (if any) concerning your urself (you may attach a separate sheet if additional space is
Certification and Signatures Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must sign and date.	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.
Student's Signature	 Date
Parent's Signature (if applicable)	Date
required to provide parental information if they were completing a FAFS, standards, even if they do not live with your parent(s).	vith your parent(s). of their support from July 1, 2017, through June 30, 2018 or if the other children would be A/California Dream Act Application for 2017–2018. Include children who meet either of thes le more than half of their support and will continue to provide more than half of their suppo
	n July 1, 2017, through June 30, 2018, or if the child would be required to provide your ation for 2017–2018. Include children who meet either of these standards, even if they do no
	heir support and will continue to provide more than half of their support through June 30,
<u>OFFI</u>	ICE USE ONLY
Comments	
Reviewed by	Date

E. Additional Information