

Name of Financial Aid Applicant <i>(Please print in Black Ink)</i>		
Last	First	MI
Student ID Number: _____		

**CUYAMACA COLLEGE
2020-2021 PARENT 2018 INCOME CERTIFICATION**

<input type="checkbox"/> Attached is a signed photocopy of my/our 2018 IRS tax transcript(s) or federal tax return and all schedules. <input type="checkbox"/> I/We did not file, and are not required to file, a 2018 federal income tax return.	Please check if you received benefits from any of these federal programs: <input type="checkbox"/> Supplemental Security Income (SSI) <input type="checkbox"/> CalWorks/Welfare
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List below all income amounts received from January 1, 2018 through December 31, 2018. Include SSI, CalWORKs, military living allowance, disability income, earnings from working, unemployment income, refugee assistance, foreign income, etc.

Source of Money	Annual Amount January 2018 – December 2018
Total	\$ _____

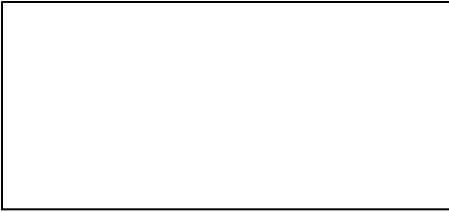
Please explain how you paid your basic living expenses in 2018 such as rent or mortgage, food, clothing, transportation and other personal needs. *(You may write your statement on a separate sheet of paper and attach it to this form)*

I/We hereby certify that all information reported on this form and any attachments hereto are true, complete, and accurate. False statements or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid.

Signatures are required for all persons reporting income above.

Signature of Father	Print name	Date
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Signature of Mother	Print name	Date
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Name of Financial Aid Applicant *(Please print in Black Ink)*

Last **First** **MI**

Student ID Number: _____

**CUYAMACA COLLEGE
2020-2021 STUDENT OR (SPOUSE) 2018 INCOME CERTIFICATION**

<ul style="list-style-type: none"> <input type="radio"/> Attached is a signed photocopy of my/our 2017 IRS tax transcript(s) or federal tax return and all schedules. <input type="radio"/> I/We did not file, and are not required to file, a 2017 federal income tax return. 	<p>Please check if you have received benefits from any of these federal programs:</p> <ul style="list-style-type: none"> <input type="radio"/> Supplemental Security Income (SSI) <input type="radio"/> CalWorks/Welfare
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	\$
	\$
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Total	\$

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Signatures are required for all persons reporting income above.

Student's Signature **Print name** **Date**

Spouse's Signature **Print name** **Date**