

## 2026-2027 Income Certification

Student Information			
COM ID# :		Student Email:	
Last Name:		Date of Birth:	
First Name:		Phone Number:	

**Check only that apply:**

- I (student) did not file and are not required to file a 2024 federal income tax return*
- I (spouse) did not file and are not required to file a 2024 federal income tax return*
- I/We (parents) did not file and are not required to file a 2024 federal income tax return*

List below all of the sources and amounts of money received from January 1, 2024 through December 31, 2024 Include untaxed income (e.g., CalWORKs, SSI, Military Living Allowance, disability income) and earnings or income not reported on a federal or state income tax return (e.g., unemployment insurance income if tax return not filed).

Student or Spouse Income Certification	
Student or Spouse Source of Money	Annual Amount January 2024 – December 2024
	\$
	\$
<b>Total</b>	\$

Parent(s) Income Certification (To be completed by dependent student)	
Parent(s) Source of Money	Annual Amount January 2024 – December 2024
	\$
	\$
<b>Total</b>	\$

If you claim to be a self-supporting student and if your income was not sufficient to pay rent, food, and other expenses; explain how your expenses were met: (Please attach a separate statement with this form)

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

**Student Name (Print):** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent(s) Name (Print):** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Spouse Name (Print):** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_