

# 2022-2023 Certification of Income & Benefits Independent Student

Student Name \_\_\_\_\_ SSN/SID \_\_\_\_\_

1. Did you (the student and/or spouse) have earnings in 2020?  No  Yes – **Attach** ALL 2020 W-2s

2. Did you (the student and/or spouse) receive any federal or state benefits in 2020?  No  Yes – **Circle ALL** benefits received

**TANF/Welfare payments    WIC    Untaxed Social Security Benefits    Supplemental Security Benefits    Housing**

*Other Benefits* not circled above:

Source: \_\_\_\_\_ Total amount received in 2020 \$ \_\_\_\_\_

Source: \_\_\_\_\_ Total amount received in 2020 \$ \_\_\_\_\_

3. Did you (the student and/or spouse) receive SNAP benefits (food stamps) in 2019 or 2020?  No  Yes

4. Did someone give you (the student and/or spouse) cash or pay your bills?  No  Yes – **List** source and amount

Source: \_\_\_\_\_ Total amount received in 2020 \$ \_\_\_\_\_

Source: \_\_\_\_\_ Total amount received in 2020 \$ \_\_\_\_\_

5. Did someone provide you (the student and/or spouse) with free housing in 2020?

**No – Explain** how your expenses were met.  **Yes**

\_\_\_\_\_  
\_\_\_\_\_

6. Did someone provide you (the student and/or spouse) with free food in 2020?

**No – Explain** how your expenses were met.  **Yes**

\_\_\_\_\_  
\_\_\_\_\_

(Use the back of the form if you need more room to explain)

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Please **print**, then sign and date above