

# 2020-2021 Certification of Income & Benefits

## Independent Student

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

1. Did you (the student and/or spouse) have earnings in 2018?  No  Yes – **Attach** ALL 2018 W-2s
2. Did you (the student and/or spouse) receive any federal or state benefits in 2018?  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 2018 \$ \_\_\_\_\_

Source: \_\_\_\_\_ Total amount received in 2018 \$ \_\_\_\_\_

3. Did you (the student and/or spouse) receive SNAP benefits (food stamps) in 2017 or 2018?  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 2018 \$ \_\_\_\_\_
- Source: \_\_\_\_\_ Total amount received in 2018 \$ \_\_\_\_\_

5. Did someone provide you (the student and/or spouse) with free housing in 2018?

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

6. Did someone provide you (the student and/or spouse) with free food in 2018?

**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