

2021-2022 Certification of Income & Benefits Independent Student

Student Name _____ EMPLID _____

1. Did you (the student and/or spouse) have earnings in 2019? No Yes – **Attach** ALL 2019 W-2s

2. Did you (the student and/or spouse) receive any federal or state benefits in 2019? 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 2019 \$ _____

Source: _____ Total amount received in 2019 \$ _____

3. Did you (the student and/or spouse) receive SNAP benefits (food stamps) in 2018 or 2019? 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 2019 \$ _____

Source: _____ Total amount received in 2019 \$ _____

5. Did someone provide you (the student and/or spouse) with free housing in 2019?

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

6. Did someone provide you (the student and/or spouse) with free food in 2019?

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