

2007-2008 INDEPENDENT STUDENT VERIFICATION WORKSHEET

RETURN TO:

 CAL POLY
 FINANCIAL AID OFFICE
 SAN LUIS OBISPO, CA 93407
FAX: (805) 756-7243

Last Name:

First Name:

EmplID#

Phone #

SECTION A: PLEASE COMPLETE THIS SECTION ABOUT YOUR FAMILY SIZE

Include the people you (and your spouse) will support between July 1, 2007 and June 30, 2008. If you need more space, attach a separate page. **Include:**

- yourself** (complete age/date of birth on the first line),
- your spouse, and**
- your dependent children** (if you provide more than half their support).

Include other people only if they:

lived with and received more than half their support from you (or your spouse) at the time you completed your application, and will continue to get this support between July 1, 2007 and June 30, 2008.

Full Name	Age/Date of Birth	Relationship	Name of College [1/2 time or more 07-08]
You – Student Applicant		Self	Cal Poly – San Luis Obispo

SECTION B: SOURCES OF 2006 INCOME NOT REPORTED ON TAX RETURN

1. If you or your spouse did not file and are not required to file a 2006 Federal Income Tax Return, check the boxes below that apply. If you had income from work, but were not required to file taxes, please submit copies of all W-2s.

- | | | |
|--|-----|-------------|
| a. I (we) did not file and am not required to file a 2006 Federal Income Tax Return. | You | Your Spouse |
| b. I (we) did not work in 2006. | You | Your Spouse |
- c. List each employer and any other sources and amounts of income during 2006. [Include untaxed income (e.g., TANF, SSI, Military Living Allowance) and any other income not reported on a 2006 tax return.] ***If none, please enter \$0.***

Your Source(s) of Income/Employer(s)	Amount(s)	Spouse's Source(s) of Income/Employer(s)	Amount(s)
	\$		\$
	\$		\$

2. Indicate the total amount received from January 1 - December 31, 2006 from the following: Work Study earnings, education credits, student grants and scholarships reported on your tax return and/or child support you paid \$ _____ .00.

SECTION C: CHILD SUPPORT & OTHER UNTAXED INCOME YOU AND YOUR SPOUSE RECEIVED IN 2006

Sources of Untaxed Income	Amount	Sources of Untaxed Income	Amount
Child Support		Welfare (including TANF)	
Social Security		Other	

SECTION D: SIGN THIS FORM

The Department of Education has selected you for Verification. Complete ALL Sections, A through D, even if zero. By signing this form, I certify that all the information reported to qualify for student financial aid is complete and correct.

Warning: If you purposely give false or misleading information on this form, you may be fined, sentenced to jail, or both.

Signature (Student)

Date

Signature (Spouse)

Date