FOOTHILL COLLEGE

FINANCIAL AID OFFICE 12345 EI Monte Rd. Los Altos Hills CA 94022-4599

DE ANZA COLLEGE

FINANCIAL AID OFFICE 21250 Stevens Creek Blvd. Cupertino, CA 95014-5793

CAL 2023-24 Independent Verification Worksheet

Stude	ent's Name	SID						
Last			First (Student ID#)					
				ired to confirm the information reported for you (and for ssary corrections to your California Dream Application.				
<u>Section</u>	on A. Family Information							
Please	e list the following other people in the chart belo	ow:						
➤ Yo	urself	people currently living with you ONLY IF you currently						
Your spouse, if you are married			provide and will continue to provide more than half of their financial support from July 1, 2023 through June 30, 2024					
	our children ONLY IF you will provide more than hal ildren's financial support from July 1, 2023 to June							
Full Name		Age	Relationship to Applicant	Name of College (if attending half-time or more during the 2023-24 academic year)				
Exampl	le: Susan Jones	30	Self	(name of your primary college)				
separa		nange in mar	ital status after Dece	If you need more space, attach a separate page. tion : If you are married and you and your spouse filed mber 31, 2021, please notify the Financial Aid Office. I an <u>extension</u> for filing your 2021 taxes.				
	Complete this section if you (and/or your	r spouse if	you are married)	had any sources of untaxed income in 2021.				
Check the box or boxes that apply:				Total amount received in 2021				
	Child support received			\$				
	Housing, food and other living allowances paid to and others	\$						
	Veterans non-education benefits	\$						
	Other untaxed income not reported above. For more space, attach a signed separate page.							
	Source:	\$						
	Source:		\$					
	Source:			\$				

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Stude	nt's Name			SID							
	Last	First			(Student ID#)						
Com	pplete this section if you (and/or y	our spouse if yo	ou are married) <u>filed or v</u>	will file a 2021 In	come Tax Return in any co	ountry.					
Chec	k the box or boxes that apply:										
	I have attached my (and my spouse's, if married) 2021 IRS Tax Return Transcript to this worksheet. (See your campus' Financial Aid Webpage for information on ordering Tax Return Transcripts and for guidance about what to do if you are unable to obtain a Tax Return Transcript.)										
	I (and/or my spouse, if married) filed a 2021 Income Tax Return in a country other than the U.S. I have attached a signed copy of that filed tax return, along with a conversion of information to U.S. dollars.										
-	artant: Do not turn in this form until the are married) filed a tax return in a coun	•	,	, ,	• • •	•					
	Complete this section if you	• •	ouse if you are married) ne Tax Return in any co		are not required to file a						
Chec	k the box that applies AND attach do	cumentation from	1:								
	I (and my spouse, if married) was/were not employed and had no income earned from work (including business income, odd jobs, etc.) in 2021.										
I (and/or my spouse) was/were employed in 2021 and have listed below the names of all employers, the amount earned from each employer in 2021, and whether the employer provided a W-2 form. (List every source of income earned in or out of the U.S., even if a W-2 form was not issued; include odd jobs, etc.)											
 For more space, attach a signed separate page with the student's name and ID number at the top. You must attach a copy of all W-2 forms issued. If a W-2 form was not issued, please attach an explanation. 											
	Employer's (source's) Na	me	Amount earned in 2021	IRS W-2 Form Issued?	If earned outside of the U.S., which country?						
Ex	xample: Sarah'sBakery		\$2,000	No	Canada						
			_			_					
						_					
l certi	ify that the information reported on t	his form is true, co	omplete, and accurate to	the best of my kn	owledge.						
Stude	ent's signature:				Date:						

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