**Student Information**

Social Security #

Peralta Student ID

Last Name (Please Print) First Name M.I. Date of Birth

Telephone Number to best reach you

**UNTAXED INCOME**

***Enter the dollar amount of all untaxed income received in 2012, if there is no dollar amount to enter please put a $0.***

|  |  |  |
| --- | --- | --- |
|  **Untaxed Income Resource** | **Student** | **Parent or Students’ Spouse, if married** |
| Child Support RECEIVED – DO NOT include Foster Care payments | $ | $ |
| Payments to tax-deferred pension and savings plan (paid directly or withheld from earnings) including, but not limited to, amounts reported on the W-2 in box 12a through 12d codes D,E,F, G,H and S | $ | $ |
| Housing, food or other allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits) | $ | $ |
| Veteran’s non-education benefits such as Disability, Death Pension, or Dependency and Indemnity Compensation (DIC) and/or VA Educational Work Study allowances | $ | $ |
| Unemployment benefits that were not reported on your tax return | $ | $ |
| Any money given to you by someone else (for bills, rent, utilities, etc) | $ | $ |

**SUPPORT CERTIFICATION**

Complete this section if the total of your (or spouse, if married) or parent(s) (if dependent) income reported on this form is less than $5,000. Please explain how you or your parents (if dependent) met their monthly expenses (low income housing, SNAP (food stamps), cash aid, social security benefits, etc.).

**CERTIFICATION**

By signing below, I/we certify the information reported on this worksheet is complete and accurate and authorize the Financial Aid Office to perform necessary electronic ISIR correction on my behalf. I/we agree to provide proof of any information reported on this form or on my FAFSA. I/we realize that any false statement or failure to give proof when asked may be cause for denial, reduction, withdrawal, and/or repayment of my financial aid. I/we also understand if we purposely give false or misleading information I/we may be fined, sentenced to jail or both. If you are a dependent student, one parent **must** sign below.

Parent’s Signature (if a dependent student) Date

Student’s Signature Date