



2019-20 VERIFICATION OF PARENT(S) NON-EMPLOYMENT INCOME

Please complete this form on a computer, or use black or blue ink.

STUDENT NAME _____ CCC ID# OR LAST 4# OF SSN _____

PARENT(S) NAME: _____

YOUR PARENT(S) INDICATED ON YOUR FAFSA THEY HAD NO INCOME FROM WORK. **HAVE YOUR PARENT(S) CHECK ALL THAT APPLY:**

- My parent(s) did not file a 2017 Federal Income Tax form.
- My parent(s) is not required to file a 2017 Federal Income Tax form because they had no work income in 2017.
- Income information was incorrectly reported on my FAFSA. My parent(s) had work income in 2017. Attached are copies of their 2017 W-2 forms.

MY PARENT(S) RECEIVED THE FOLLOWING PUBLIC ASSISTANCE FOR 2017 OR 2018:

- ADC/AFDC
- Food Stamps
- Medicaid/Untaxed Social Security Benefits
- VA Benefits (specify) \$ _____
- Workman's Compensation
- Other _____

MY PARENT(S) SUPPORT IN 2017 WAS MADE AVAILABLE BY:

- Family Member Name _____ Relationship _____
- Friend/Significant Other Name _____

PLEASE HAVE YOUR PARENT(S) PROVIDE A BRIEF STATEMENT OF HOW THEY SUPPORTED THEIR FAMILY.

Signing below certifies that all of the information reported is complete and correct. One parent whose information was reported on the FAFSA must sign and date. An electronic signature is not valid.

PARENT SIGNATURE

DATE

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Please return this form to the Financial Aid Office at the location you plan to attend:

Central Community College – Columbus	PO Box 1027	Columbus, NE 68602-1027	Fax: 402-562-1290
Central Community College – Grand Island	PO Box 4903	Grand Island, NE 68802-4903	Fax: 308-398-7407
Central Community College – Hastings	PO Box 1024	Hastings NE 68902-1024	Fax: 402-461-2447
Central Community College – Kearney	PO Box 310	Kearney, NE 68848-0310	Fax: 308-338-4041