



2018-19 VERIFICATION OF PARENT(S) NON-EMPLOYMENT INCOME

Please type this form, or use black or blue ink.

STUDENT NAME _____ SOCIAL SECURITY # _____

ADDRESS _____ PHONE _____

CITY _____ STATE _____ ZIP _____

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

- I did not file a 2016 Federal Income Tax form.
I am not required to file a 2016 Federal Income Tax form.

MY PARENT(S) RECEIVED THE FOLLOWING PUBLIC ASSISTANCE FOR 2016 OR 2017:

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

MY PARENT(S) SUPPORT 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.

Blank lines for providing a brief statement of how the parent(s) 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.

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, Grand Island, Hastings, Kearney with corresponding PO Box, address, and fax numbers.