



S \_\_\_\_\_  
 Student's CCA ID Number

## 2024-2025 Dependent Student Statement of Income

*Entire Form must be completed in black ink.*

Student's Printed Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

In reviewing your application for financial aid, we have identified that you and your parent(s)' income reported are very low, and we need clarification on how your parent(s) supported people in your household financially in 2022. **In the fields below, please complete ALL boxes to indicate the sources of income and expenses for the calendar year 2022.**

**2022 Income:** How much did you earn in 2022? Do not leave any boxes blank. If an item is not applicable, please write \$0.

	Student	Parent		Student	Parent
<b>Earnings from work</b>			<b>Pension/ retirement</b>		
<b>Unemployment compensation</b>			<b>Child support received</b>		
<b>Disability benefits</b>			<b>Money from financial aid</b>		
<b>Social security benefits</b>			<b>Money from relatives/ friends/ others</b>		
<b>VA benefits</b>			<b>TANF</b>		
<b>WIC</b>			<b>Food Stamps/ SNAP</b>		
<b>Other</b>			<b>Please specify source:</b>		

**2022 Expenses:** How much did you spend in 2022? If someone financially supported you, indicate the total amount **paid on your behalf** in 2022 and explain who provided support. Do not leave any boxes blank. If an item is not applicable, please write \$0.

	Student's Total amount paid in 2022	Parent's Total amount paid in 2022	If you or your parent(s) did not pay, please explain who paid on your behalf and how much was paid.
<b>Housing:</b> mortgage, rent, section 8			
<b>Food</b>			
<b>Utilities</b>			
<b>Transportation</b> (car payment, car insurance, gas, bus pass)			
<b>Phone bill</b>			
<b>Personal expense</b>			
<b>Medical expense</b>			
<b>Child care</b>			
<b>Credit card</b>			
<b>Others</b>			

By signing this document, I certify that the information is complete, true and accurate. I understand that purposely providing false or misleading information could result in criminal prosecution, prison sentence, and/or a fine pursuant to U.S. Criminal Code and Colorado Criminal Code. **IMPORTANT: *Financial Aid can only pay for the classes required by your declared major. Please refer to your degree check or make an appointment with your advisor.***

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_