



Scholarship Application: Income Verification Form

Participant Name: _____ DOB: _____

Parent(s) Name: _____ Address: _____

Section I. Proof of Annual Gross Household Income

Gross Income is the total amount of revenue before taxes or other deductions. Proof of income must be attached.

Source Income	Gross Amount	Documentation used for proof
Employer: _____	_____	Pay Stub, W-2
Employer: _____	_____	Pay Stub, W-2
Unemployment Benefits	_____	Check Stub, Letter, Tax Return
Social Security	_____	Check Stub, Statement, Tax Return
Disability (Temp, Long Term, Etc)	_____	Check Stub, Statement, Tax Return
Military Pay or Benefits	_____	Check Stub, Statement, Tax Return
Retirement (Pension, Annuity, Etc)	_____	Check Stub, Statement, Tax Return
Alimony	_____	Court Document, Tax Return
Child Support	_____	Court Document, Tax Return
Other: _____	_____	check stubs, letter, tax return

Number of Household Occupants: _____

This number includes the participant, parents, other children and stepchildren. Include all legal family members living in the household who are dependent on the income recorded for the household.

Attestation of Zero Annual Gross Household Income:

I attest to the fact that I reside in a household with no income. _____

Client Signature

Date

Attestation of Responsibility:

I understand that I need to report any and all changes (increase or decrease) in my income and/or changes in household size because this has a direct bearing on determining my financial eligibility for a scholarship. I also understand and agree that I will provide a copy of my proof of income as requested.

Parent/Guardian Signature Required

Date

I have reviewed this Form along with the attached supporting documentation and have determined the annual gross household income to be \$_____. Amount of scholarship:_____

Finance Signature

Date