2013-14 Parent Income Verification Form

Parent(s) Tax & Income Information for 2012 (if student is dependent on FAFSA)

Tax Filers:

1. Attach a copy of your parent(s)’ 2012 Tax Return Transcript received directly from the IRS.
   (Tax Filers: Skip # 4, # 5, and # 6 and sign the bottom)
   *The 1040, 1040A, or 1040ez forms are no longer accepted as proof of tax filing.*
   
   You can order a 2012 Tax Return Transcript at [www.irs.gov](http://www.irs.gov), by phone at 1-800-908-9946, or in person at the Internal Revenue Service at 209 North D Street, San Bernardino, CA.

Parent Asset Information:

2. Cash/checking/savings balance as of the date you signed the FAFSA $ _______________.

3. Investment value as of the date you signed the FAFSA $ ____________________ (Rental Real Estate, Stocks, etc…)

Non Tax Filers:

4. If your parent(s) did work and are not required by the IRS to file a tax return, list below their employer(s), any income received in 2012 and attach all W2 forms. If your parent(s) were not eligible to receive W2’s, please check the “cash” box next to the 2012 Annual Income Amount.

<table>
<thead>
<tr>
<th>Employer / Source of Income</th>
<th>2012 Annual Income Amount</th>
<th>Cash</th>
<th>W-2s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father/Stepfather</td>
<td>$</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother/Stepmother</td>
<td>$</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Other Parent Income Information:

(If you earned wages from work or filed taxes, skip # 5 and # 6)

5. Please place a check mark by those individuals who did not work in 2012 and were not required by the IRS to file a tax return:
   - Your father / stepfather
   - Your mother / stepmother

6. My Parent(s) did not work, but were supported in the following ways:
   - Supplemental Security Income (SSI) □
   - AFDC/TANF □
   - Social Security Income □
   - No cash/check or other funds were received for my expenses; all support was provided by __________________________ (Relatives, family, friends, etc…) □
   - Cash/check was provided as a source of support by __________________________ in the amount of $ ________________ per month for ___________ months.

By signing this worksheet, I/we certify that all the information reported on it is complete and correct.

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Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

All applications for financial assistance programs, (i.e., student loans, work compensation, grants, scholarship, special funds, subsidies, prizes, etc.), will be considered by the Riverside Community College District without regard to ethnic group identification, national origin, religion, age, sex or gender, race, color, ancestry, sexual orientation, physical or mental disability, or any characteristic listed or defined in Section 11135 of the Government Code or any characteristic that is contained in the prohibition of hate crimes set forth in subdivision (1) of Section 422.6 of the California Penal Code, or any other status protected by law. Alternate formats for this material are available to individuals requiring disability accommodation. Please contact Sandy Mathay at 951-222-8719, or the office of Diversity, Equity and Compliance at (951) 222-8039.