

**2008 STUDENT INCOME CERTIFICATION**

**Financial Aid Office**

**Prescott Campus** • 1100 East Sheldon Street • Prescott, Arizona 86301 • (928)776-2152  
**Verde Valley Campus** • 601 Black Hills Drive • Clarkdale, Arizona 86324 • (928)634-6502  
**Email** • prescott\_financial\_aid@yc.edu    **Toll-free** • (800)922-6787 ext. 2152-Prescott / 6502-Verde

You reported an unusually low income for 2008. List the total amount you received in each category in 2008. If you are married be sure to include your spouse's income. If you had any other type of income, please name the source and amount under "Other Income". Be sure to include your spouse's income if you are married. Both student and spouse must sign and date this form.

Student Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

**INCOME AND RESOURCES**

	<b>2008 Amount</b>
• Student's Wages	\$ _____
• Spouse's Wages	\$. _____
• Social Security Benefits	\$ _____
• AFDC/TANF (welfare)	\$. _____
• Food Stamps	\$ _____
• Child Support Received	\$. _____
• Financial Aid (grants, scholarships, and loans)	\$ _____
• Cash Received from Family or Others	\$ _____
• Other Income: _____	\$ _____
➤ <b>TOTAL 2008 INCOME and RESOURCES</b>	<b>\$ _____</b>

Please briefly explain how your expenses were met. **DO NOT LEAVE BLANK.**

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How many months in the year 2008 were your expenses paid by someone else on your behalf? \_\_\_\_\_

Expenses that were paid on your behalf must be included as income on the FAFSA. If your expenses were paid on your behalf, you can either use the standard allowance of \$600 per month or provide a detailed listing of the amounts paid on your behalf.

Use the standard allowance.

Itemize the amount paid on your behalf. Attach a detailed list of your expenses; include amounts for housing, food, utilities, transportation, personal expenses, and any other expenses you incurred in 2008.

I/we hereby certify that all information reported on this form and any attachments, is true, complete and accurate. False statements will be cause for denial, reduction, withdrawal, and/or repayment of financial aid.

\_\_\_\_\_ Date \_\_\_\_\_  
Student's Signature

\_\_\_\_\_ Date \_\_\_\_\_  
Spouse's Signature (**Required if married**)

**DO NOT LEAVE ANYTHING BLANK! MISSING INFORMATION WILL CAUSE SIGNIFICANT DELAYS**