

RETURN TO:
Chabot College FAO
25555 Hesperian Blvd, Rm 110
Hayward, CA 94545

Name of Financial Aid Applicant <i>(Please print)</i>		
Last	First	Middle
Student ID: _____		

STUDENT (SPOUSE) 2008 NON-FILER / INCOME CERTIFICATION

Our review of your financial aid application indicates that your (and your spouse's, if married) total income from all sources for 2008 appears to be unusually low. **Complete this form, attach any documentation requested and return to our office during business hours so we may work with you to establish your financial aid eligibility.**

<input type="checkbox"/> Attached is a signed photocopy of my/our 2008 federal income tax return.	<input type="checkbox"/> I/We did not file, and am/are not required to file, a 2008 federal income tax return per Federal IRS Requirements.
---	---

Section A Family Information

List the people in your household. **You may only include:**

- yourself and your spouse, if married;
- your children, if you will provide more than half of their financial support from July 1, 2009, through June 30, 2010; and
- other people who live with you, and receive more than half their financial support from you, and who will continue to live with you and receive more than half of their support from you through June 30, 2010.

Write the names of only those household members meeting definition above. *You may not include roommates.* Then indicate the name of the college for any household member who will be attending college at least half time in a degree or certificate program between July 1, 2009 and June 30, 2010. If you need more space, attach a separate page.

Full Name	Age	Relationship	Name of College
		Self	Chabot Community College

Section B Monthly Expenses

Complete the following review of monthly expenses and source of payment. You identified yourself as a self-supporting student, and/or provides more than 50% of the support of another person. If your monthly expenses were more than the 2008 income listed on the Free Application for Federal Student Aid (FAFSA) or the income listed above, provide an explanation in the "Statement" section. **Do not leave any field blank; you must provide a response for each item below, both expense and support. If the item does not apply to you or your spouse (they did not have a specific expense), they must enter "\$0" or "n/a".**

Student/Spouse's Living Expenses <small>from 1/1/08 - 12/31/08</small>	Expenses <small>List amount per month</small>	Support <small>List amount per month</small>	How was this expense paid? Who provided the support?
1. Housing (rent, mortgage)			
2. Food			
3. Utilities (home phone, electric/gas, cable, etc.)			
4. Auto (car payment, gas, insurance, maintenance)			
5. Childcare			
6. Credit cards			
7. Medical/Dental			
8. Cell Phone			
9. Other personal expenses (clothing, misc)			
Total Monthly Expenses/Income/Support (lines 1-9)			
Total Yearly Expenses/Income/ Support (line 10 x 12)			

Section C Untaxed Income

List below all sources and amounts of money received by you or your spouse from January 1, 2008 through December 31, 2008. Include any untaxed income, earnings or income not reported on a federal income tax return. **Do not leave any field blank; you must provide a response for each item on this form. If the item does not apply to you or your spouse (you did not receive the form of income), you must enter "\$0" or "n/a".**

	How much per month?	Number of months assistance received in 2008?
<input type="checkbox"/> Earnings/income from W2, not reported on federal income tax return	\$	
<input type="checkbox"/> AFDC/TANF (welfare)	\$	
<input type="checkbox"/> Unemployment	\$	
<input type="checkbox"/> Social Security	\$	
<input type="checkbox"/> Disability	\$	
<input type="checkbox"/> Child Support Received	\$	
<input type="checkbox"/> I/We lived with relative or someone else who provided me/us with free room and board in 2008.		

Statement If you claim to be a self-supporting student, and if your income was not sufficient to pay rent, food, and other expenses, explain how your expenses were met. (*You may attach a separate sheet if additional space is needed.*) If your income has increased in 2009, please explain how, and list your total anticipated income (taxable and nontaxable) for 2009. Documentation may be requested. **This form will be considered incomplete and returned to you for completion if the explanation is missing or does not provide enough detail.**

I/We hereby certify that all information reported on this form and any attachments is true, complete, and accurate. I understand that if this form is incomplete, it will delay review of my financial aid eligibility. False statements or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid. **If you purposely give false or misleading information on this application, you may be fined up to \$20,000, be sentenced to jail, or both.**

Signatures are required for student and spouse.

Signature of Applicant

Date

Spouse's Printed Name

Signature

Date

California Information Privacy Act

State and federal laws protect an individual's right to privacy regarding information pertaining to oneself. The California Information Practices Act of 1977 requires the following information be provided to financial aid applicants who are asked to supply information about themselves. The principal purpose for requesting information on this form is to determine your eligibility for financial aid. The Chancellor's Office policy and the policy of the community college to which you are applying for aid authorize maintenance of this information. Failure to provide such information will delay and may even prevent your receipt of financial assistance. This form's information may be transmitted to other state agencies and the federal government if required by law. Individuals have the right of access to records established from information furnished on this form as it pertains to them.

The officials responsible for maintaining the information contained on this form are the financial aid administrators at the institutions to which you are applying for financial aid. The SSN may be used to verify your identity under record keeping systems established prior to January 1, 1975. If your college requires you to provide an SSN and you have questions, you should ask the financial aid officer at your college for further information. The Chancellor's Office and the California community colleges, in compliance with federal and state laws, do not discriminate on the basis of race, religion, color, national origin, gender, age, disability, medical condition, sexual orientation, domestic partnership or any other legally protected basis. Inquiries regarding these policies may be directed to the financial aid office of the college to which you are applying.