

RETURN COMPLETED FORM TO:

**Napa Valley College
Financial Aid/EOPS Office
2277 Napa-Vallejo Hwy.
Napa, CA 94558**

Financial Aid Applicant Name (Last, First, Middle) *Please Print*

Social Security Number / Student I.D. Number

2009-2010 UNTAXED INCOME CERTIFICATION

Federal and state regulations relative to student financial aid mandate coordination and certification of all family financial resources. The information provided below will be used only to determine financial aid eligibility and will be kept confidential by the campus pursuant to Sections 76200-76246 of the *California Education Code* and the 1974 Family Education Rights and Privacy Act.

1) IF NO UNTAXED INCOME WAS RECEIVED:

- You (and your spouse or parents, if applicable) must complete and sign Section A.
- Submit form to the Financial Aid/EOPS Office.

2) IF UNTAXED INCOME WAS RECEIVED:

- You (and your spouse or parents, if applicable) must complete and sign Section B. Use a separate form for each type of income received.
- The AGENCY from which untaxed income is received must complete Section C on the reverse.
- Submit form (and printout if applicable) to the Financial Aid/EOPS Office. *INCOMPLETE FORMS WILL BE RETURNED TO YOU UNPROCESSED*

SECTION A

I/We received no untaxed income during 2008 (January 1, 2008 through December 31, 2008).

Financial Aid Applicant's Signature

Date

Mother's Signature

Date

Spouse's Signature

Date

Father's Signature

Date

SECTION B

I/We authorize the appropriate office/agency to provide the information requested by the school listed above.

List Type of Income/Benefit Received: _____

Case Name Under Which Benefits Are Paid. *Please Print*

ACTIVE CASE Number

Financial Aid Applicant's Signature

Date

Mother's Signature

Date

Applicant's Spouse's Signature

Date

Mother's Social Security Number

Spouse's Social Security Number

Father's Signature

Date

Father's Social Security Number

AGENCY MUST COMPLETE CERTIFICATION ON REVERSE

