



Return to:
 5500 University Parkway
 San Bernardino, CA 92407
 University Hall 150
 Tel: (909) 537-5227
 Fax: (909) 537-7024

2011-2012 Independent Verification Form

Student Name: _____ Coyote ID: _____
 Address: _____ Phone: _____
 _____ Email: _____

Household Information:

List the people you (and your spouse) will support between July 1, 2011 and June 30, 2012.

Include:

- Yourself & Your spouse (if applicable)
- Your dependent children (if you will provide more than half of their support from July 1, 2011 through June 30, 2012.

Include other people as part of your household only if:

- They now live with you and you provide more than half of their support **AND**
- You will continue to provide more than half their support from July 1, 2011 through June 30, 2012.

Write the names of **all** household members, as directed above. Use a separate sheet if necessary.

Full Name	Age	Relationship to Student
Student: _____	_____	Self
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Student/Spouse Income Information

1. Check only one item below. Tax returns include the 2010 IRS Form 1040, 1040A, 1040EZ, a tax return from Puerto Rico or a foreign income tax return. If you did not keep a copy of your tax return, request a copy from your tax preparer or request an Internal Revenue Service form that lists your tax information.

- Check here if you are attaching a signed copy of your and/or your spouse’s tax return.
- Check here if you will not file and are not required to file a 2010 U.S. income tax return.

2. If you and/or your spouse did not file and are not required to file a 2010 Federal income tax return, list below the employer(s) and any income received in 2010 (attach W-2 form(s) or other earnings statements).

Source(s) of Student Income	2010 Income Amount
_____	_____
_____	_____

Source(s) of Spouse Income	2010 Income Amount
_____	_____
_____	_____

3. If you had no income or significantly low income in 2010, provide a written explanation of how you met your living expenses and financial obligations.

CERTIFICATION:

By signing this worksheet, I (we) certify that all of the information reported on this form and any attachments hereto is true, complete and accurate. I (we) agree to provide additional proof of the information if requested to do so. **Signature is required for the student, spouse signature is optional.**

Student’s Signature: _____ **Date:** _____

Spouse’s Signature: _____ **Date:** _____