

Alternate Income Information Form for Women of Tomorrow Scholarship Applicants 2015-2016

Student Name: _____

High School: _____

Parent/Guardian(s) Name(s): _____

If you have not submitted the 2015-16 FAFSA because you and/or your parent(s)/guardian(s) have not filed the 2015 federal income tax return(s) OR you and/or your parent(s)/guardian(s) are not required or unable to file a federal income tax return, please complete the information requested below:

Are your parent(s)/guardian(s) required to file a 2015 federal tax return? ☐ Yes ☐ No ***Filing an Extension** ☐

Are you required to file a 2015 federal tax return? ☐ Yes ☐ No ***Filing an Extension** ☐

***If you indicated you are filing an extension you are required to submit the extension form and W2's or 1099's.**

Income and Resources for January to December 2015	Parent(s)/ guardian(s)	Student
Estimated income earned from work (provide W2 form or proof of earnings e.g. letter from employer)		
Child support received for all children		
Pensions or retirement benefits		
Housing, food, or other living allowances for military, clergy, etc. (including cash payments and cash value of benefits)		
Veteran Benefits (non-educational; specify type)		
Worker's compensation		
Disability benefits other than Social Security		
Cash received, or any money paid on your behalf, towards living and/or educational expenses (please specify)		
Alimony or separation maintenance		
Supplemental Security Income (SSI)/ untaxed Social Security benefits		
Public Assistance/Welfare benefits		
Unemployment compensation that was not included on your tax return		
Other (please specify) Please provide letter from third party e.g. clergy, counselor		
Total Income 2015		

If the source of the 2015 income received by you and/or your parents is not included in the above categories please describe your special circumstances below or attach a separate statement. **You must include a signed letter from a credible third party who is familiar with your family circumstances and can verify/attest to the information provided.** (For example: guidance counselor, pastor, etc.)

Certification: We certify that all information reported on this form and any attachments is true, complete and accurate.

Parent/Guardian Signature: _____

Date: _____

Student Signature: _____

Date: _____