



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

Name: \_\_\_\_\_ CoyoteID: \_\_\_\_\_

Phone: \_\_\_\_\_

### 2016-2017 Dependent Income Verification

**PARENT INCOME (please check ONE only):**

**Tax Filer** (if you filed taxes you must complete one of the following items listed)

- Successfully used the IRS Data Retrieval Tool to import my income information on the FAFSA
- Attached are my 2015 Federal Tax Return Transcripts obtained from the IRS and 2015 W-2s

**Non Tax Filer**

If you worked but you did not file Federal taxes for 2015, you must attach your 2015 W-2s

Not employed and had no income earned from work in 2015

Copy of Form 4868 or electronic acknowledgement AND copies of all 2015 W-2 forms

**STUDENT INCOME (please check ONE only):**

**Tax Filer** (if you filed taxes you must complete one of the following items listed)

- Successfully used the IRS Data Retrieval Tool to import my income information on the FAFSA
- Attached are my 2015 Federal Tax Return Transcripts and 2015 W-2s

**Non Tax Filer**

If you worked but you did not file Federal taxes for 2015, you must attach your 2015 W-2s

Not employed and had no income earned from work in 2015

Copy of Form 4868 or electronic acknowledgement AND copies of all 2015 W-2 forms

**CERTIFICATION AND SIGNATURES**

Each person signing this worksheet certifies that all information reported is true and complete. The student and one parent must sign and date.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_