

USF UPWARD BOUND CONFIDENTIAL FINANCIAL INFORMATION (Parents/Guardians)

For purposes of documentation, please provide a **SIGNED** copy of your Federal Income Tax Return (pages 1 & 2). Make sure that it contains the names of your dependent who is applying for Upward Bound and the "**Taxable Income**". If you have not yet completed your tax return, mail or fax a copy of the tax form as soon as it is completed. If you do not submit a tax return, you must fill out this form. **If you did not file a tax return you will be required to provide another source of income verification before your application can be processed.**

Guardian Name _____ Student's Name _____

Part I. Did you, or are you planning to file a federal income tax return for **2020**? ___ Yes ___ No **If No, Go to Part II**

If yes, what was your **taxable** income? (Check which form was used and fill-in the taxable income.)

IRS FORM 1040 Usually Line 15 _____ \$ _____

and
NUMBER OF EXEMPTIONS (Family Size):

Part II. Only fill out this part if you did not file taxes or the applicant is not listed on your taxes.

1 Do you qualify for food stamps? Yes ___ No ___ Case# _____

2. Do you qualify for public assistance? Yes ___ No ___ Case# _____

Please provide documentation of receiving public assistance, such as the award letter.

HOUSEHOLD MEMBERS List the names of everyone currently residing in the household (also list last four of social security number)	Gross MONTHLY Earnings (before deductions)	MONTHLY Welfare Payment, Child Support, Alimony, Public Assistance	MONTHLY Payments from Pensions, Retirement, Social Security, Veterans Benefit	Any other MONTHLY Income
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

CERTIFICATION BY PARENT

We have checked this form for omissions and errors. To the best of our knowledge, the information reported is complete and correct. We are to inform the UPWARD BOUND Director of any major change in our financial status if our daughter/son is selected as a participant in the project. Further, we agree to send to the Director an official copy of our latest Federal Income Tax Return obtained from the appropriate district office of the United States Internal Revenue Service, if requested.

Signature of Parent(s) or Guardian(s) (**A MUST**)

(Parent/Guardian)

(Date)