2017-18 CAL Dependent Student Verification

CDVF17

 \square Yes

□ Yes

 \square No

 \square No

Financial Aid Office Gavilan College 5055 Santa Teresa Blvd. Gilrov, CA 95020

Student's Last Name

Tel: 408-848-4727, 408-852-2812

Dependent Student's Information

Your 2017-18 California Dream Act (CA-DREAM) was selected for review in a process called verification. The law says that before awarding State aid, we must ask you to confirm the information you and your parents reported on your Dream Act. To verify that you provided correct information, the Financial Aid Office will compare your Dream Act with the information on this worksheet and with any other required documents. If there are differences, your Dream Act information may need to be corrected. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the forms to Gavilan.

Student's M.I.

Student's Gavilan ID

Student's First Name

Student's Street Address (include apt. no.)					Student Social Security/CSAC ID# (if known		
City State		Zip Code		le	Student's Date of Birth		
			Telephone Number				
2. List peop	le in your parent(s) household. T	his incl	udes:				
☑ Yourself even if you don't live with your parent(s).			_	r parent(s) (including biological, adoptive, or unmarried living together regardless of gender).			
than half of 2018, or i parental in 2017–201 even if the Include the certificate p	ont(s)' other children if your parent(s) will profit their support from July 1, 2017, through J of the other children would be required to profit the other children would be required to profit they were completing a Dream 8. Include children who meet either of these by do not live with your parent(s). name of the college for any household program at a postsecondary educational	une 30, ovide a Act for e standard member institutio	s, who wi on any ti	parent(s) p continue to 2017 through	n July 1, 2017, and June 30	support and eir support from	will om July 1, ma, or
is needed, d	attach a separate page with the student'				•		
Pai	Full Name of Person in rent Household (per definition above)	Age		onship	College	colleg person	ending ge, will enroll at alf time?
1			S	elf	Gavilan College	□ Yes	□ No
2						□ Yes	□ No
3						□ Yes	□ No
4						□ Yes	□ No
5						□ Yes	□ No
7						☐ Yes	□ No
'							□ 1 10

CDVF	F16 Student's Name):	G00				
3. Ir	ncome	Carra Okaska ukasa kan fan	"O (haas faa KDamaat II			
		Student	"Student" and only one box for "Parent." Parent				
[I am attaching my 2015 Gavilan may not accept	5 IRS Tax Return Transcript.	☐ I am attaching my 2015 IRS Tax Return Transcript. Gavilan may not accept copies of tax returns. ☐ I filed an amended 2015 Tax Return or have filed an extension. Contact Financial Aid Office at (408) 848-4763 for additional steps.				
[I filed an amended 201:	5 Tax Return or have filed an ancial Aid Office at (408) 848-4763					
[I did not file 2015 Fede	eral Income Tax Return AND I'm ax Return. If you select this option, and income earned AND submit	☐ I did not file 2015 Fedonot required to file a Ta	eral Income Tax Return AND I'm ax Return. If you select this option, s) and income earned AND submit			
	EMPLOYER	WAGES for 2015	EMPLOYER	WAGES for 2015			
[I did not file 2015 Tax 2015.	Return and did not have earnings in	I did not file 2014 Tax 2015.	Return and did not have earnings in			
	•	your 2015 IRS Tax Transcript* e sure to request Tax Return Trai		nscrint			
		click on "Order a Return or Acco		•			
			·	·			
		click on "Get Transcripts for My of unavailable, but will be restored		load a Tax Return Transcript.			
e aw	are that option 1 & 2	can take up to 10 business day	ys for delivery of transcr	ript via mail.			
e ado	dress used when the 2	O Number or SSN, date of birth, a 2015 IRS tax transcript was filed). tax return filers, and up to 8 week	It takes up to 2 weeks fo	or the IRS income information			
E in		worksheet certifies that all of the is complete and correct.	information on this wor	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.			
S	tudent Signature:		Date:				
D	oront Signaturo		1	Date:			