

Project Year	

STATEMENT OF FAMILY INCOME

CLIENT NAME				☐ Independent ☐ Dependent		
PARENT NAME (If Minor or Depe						
NUMBER IN HOUSEHOLD	<u></u>					
I (or my dependent) appli in order to satisfy Department of I and correct to the best of my know	Education require					unity Center (SWTJC EOC) and certify that the following is true
☐ I, the Parent, am not r	equired to file a	Tax	Return			
☐ My household is not a	required to file a	Тах	Return			
The source(s) of income	ne for 2023 were	e (ch	neck all that appl	y)		
☐ SSI/Other S ☐ Child Supp	Social Security Be ort in the amount ces:	nefi of \$		of \$_	\$	
FILING STATUS	ADJUSTED GROSS INCOME	_	STANDARD DEDUCTION	=	TAXA INCO	
[] Single	\$	_	\$ 13,850	=	\$	
[] Head of household	\$	_	\$ 20,800	=	\$	
[] Married Joint Return or Widowed with Dependent	\$	-	\$ 27,700	=	\$	
[] Married Filing Separately	\$	_	\$ 13,850	=	\$	
confidential and is used only to					•	provided herein is considered ne-based opportunities that I, o
my dependent, may seek. Signature Client Parer	nt of Minor/Depen	den	t Client		Date	