



STUDENT SUPPORT SERVICES

## SSS TRIO Income Verification Form

**Full Name**

**Student ID**

**Cohort Year**  
**2020-2021**

**Tax Year**  
**2018**

**Number of family members living in the household**

**Parent 1** (*exact name as on tax form 1040*)

**Parent 2** (*exact name as on tax form 1040*)

**Address, City, State & Zip Code** (*exact address as on tax form 1040*)

**Taxable Income** (*Line 10 on the IRS 1040 form*)

I certify, under penalty of perjury under the laws of the State of California, that I have provided complete and accurate responses to all the items on this form. My signature certifies the accuracy and completeness of the information provided, and releases SSS/TRIO to obtain educational documents and financial aid records to determine, enhance and/or report the effectiveness of the program and services provided to me. I also give my permission for SSS/TRIO personnel to share information with appropriate educators and college representatives as necessary to support my educational progress and academic success.

---

Student Signature

---

Date