FINANCIAL AID AND SCHOL UC SANTA			19PFYINCOM		
UCSC Student's ID /Account Number (Do not use CRUZ ID)	UCSC Student	's Last Name	First Name		
2018–2019 Pa	rent Future Ye	ear Income Estimate and Expe	enses		
Please provide an estimate of your expect not apply to you, enter "0".	ed income using the dat	tes provided. <b>Please do not leave blanks.</b> If the ar	nswer is zero, or does		
		and Privacy Act) laws, our office will only speak ase Information" form provided directly to UCS			
		Date parent employment changed			
the letter you received which verifies you unemployment claim letter. Include all so	ır change in employmen everance package docun endent Student Verificat	nuary 1, 2018 through <u>December 31, 2018</u> t status such as layoff or reduction in time notice. A nentation. You must also submit a complete copy of ion Packet if you have not already done so.	lso, attach a copy of your		
Projected income earned befor	-	/for 12 month period list			
Projected income earned before taxes by Parent 2 \$/for 12 month period listed above					
In 2016 or 2017, did you or anyone in your household receive benefits from any of the Federal programs listed below? Mark all programs that apply: <ul> <li>Supplemental Security Income</li> <li>Supplemental Nutrition Assistance Program (SNAP)</li> <li>Free or reduced price lunch</li> <li>TANF</li> <li>WIC</li> </ul>					
TAXABLE INCOME	ANNUAL	UNTAXED INCOME	ANNUAL		
Interest & dividend income	\$	Payments to tax-deferred pension and savings			
Alimony	\$	plan (e.g. 401K) Was this included in wage figures above?   yes	\$ ] no		
Business income	\$	IRA, Keogh, SEP, SIMPLE retirement contribution			
Capital gains (or loss)	\$	Child support Received $\Box$ Paid $\Box$			
Other gains (or loss)	\$	Paid by (parent name)			
-	÷	For	\$\$		
Retirement/pension benefits Rental property, royalties, partnerships,	Ş	Tax exempt interest	\$		
S corporation, trust income	\$	Untaxed IRAs/pension distributions excluding rollovers	Ś		
Farm income	\$	Housing, food and other living allowances paid to	members of the military.		
Unemployment compensation	\$	clergy and others (including cash payments and o <b>Do not include</b> the value of on-base military ho	cash value of benefits).		
Taxed Social Security benefits	\$	basic military allowance for housing.	\$		
Paid lump sum benefits: retirement,	ć	Veterans noneducation benefits	\$		
vacation, sick pay, etc. Student grant and scholarship aid	ې	Other untaxed income such as workers' compensation			
to be reported to the IRS in your		Also include the untaxed portions of health savings ac line 25. <b>Don't include</b> extended foster care benefits, s	tudent aid, earned income		
adjusted gross income	\$	<ul> <li>credit, addtional child tax credit, welfare payments, ur</li> <li>Supplemental Security Income, Workforce Innovation</li> </ul>			
Combat pay	\$	<ul> <li>tional benefits, on-base military housing or a military l</li> </ul>			

\$\_\_\_\_

benefits from special spending arrangements (e.g. cafeteria plans), foreign income

\$\_

exclusion, or credit for federal tax on special fuels.

UCSC Student's ID /Account Number (Do not use CRUZ ID) UCSC Student's Last Name

First Name

PARENT EXPENSE STATEMENT					
Rent or mortgage payment Property tax Utilities (gas, electric, phone) Food and household items Car and/or transportation (car payments, insurance,	ANNUAL \$ \$ \$ \$	Child support paid (Do not include support paid for children living in your home, or for the UCSC student.) Paid by (parent name) For For	\$		
gas, repairs and maintenance, bus)	\$	Vacation and recreation	\$		
Medical and dental (not covered by insurance)	\$	Other (specify):			
Health insurance premiums	\$		\$		
Child care and/or elder care	\$	(Do not include federal or state taxes as these are already taken into account)			
Consumer debts and/or other personal loans	\$	TOTAL EXPENSES	\$		

## If expenses exceed income, explain how you met your expenses below.

## PARENT CERTIFICATION

• I hereby declare that all information reported on this document is true, complete, and accurate to the best of my knowledge.

• I understand that any false statement or misrepresentation will be cause for denial, reduction, cancellation and/or repayment of financial aid.

Please report your marital status as of the date you submitted the 2018-2019 financial aid application. As of the date I filed the 2018–19 financial aid application, I, the parent, am (check **one** box below):

Never Married

□ Divorced or Separated

□ Married/Remarried

Month and year you were either divorced, separated, married/remarried, or widowed.

- □ Widowed
- Unmarried and both parents living together

Parent Signature	_ Date//
Parent Daytime Phone ()	Parent E-mail Address
Parent Name	Date// (Mo/Day/Year)

RETURN TO: UC Santa Cruz Financial Aid and Scholarship Office, 205 Hahn Student Services Building, 1156 High Street, Santa Cruz, CA 95064 Phone: (831) 459-2963 Web: financialaid.ucsc.edu. For your protection and security, please do not e-mail forms.