



Name of Financial Aid Applicant (Please print):

RETURN TO:
Financial Aid Office
8045 E. Chapman Ave., Rm. E-104
Orange, CA 92869-4512 (714) 628-4876

Last First Middle Initial
Student ID#: _____

Verification of Other Household Members

The Financial Aid Office needs more information to identify who lives with your parents and if your parents provide more than half of their support and will continue to provide more than half of their support through June 30, _____.

List all members who live in your parent’s household who are either a non-sibling or a sibling over 24 years of age:

Name	Age	Relationship	Income earned from work (enter "NA" for persons under 18 years of age) Year: _____	List all other income (Such as workers compensation, disability, SSI, SSA or Social Security, SNAP, welfare or TANF/Cal Works, etc.)
(Example) Mary Smith	65	Grandparent	\$0	Social Security
(Example) David Jones	24	Brother	\$10, 500	N/A

Note: We may require additional documentation if we have questions regarding the information you provided.

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the DREAM ACT must sign and date.

Student’s Signature Date

Parent’s Signature Date

Non-Discrimination Policy
The Rancho Santiago Community College District is committed to equal opportunity in educational programs, employment, and all access to institutional programs and activities. The District, and each individual who represents the District, shall provide access to its services, classes, and programs without regard to national origin, religion, age, gender, gender identity, gender expression, race or ethnicity, color, medical condition, genetic information, ancestry, sexual orientation, marital status, physical or mental disability, pregnancy, or military and veteran status, or because he or she is perceived to have one or more of the foregoing characteristics, or based on association with a person or group with one or more of these actual or perceived characteristics. The Chancellor shall establish administrative procedures that ensure all members of the college community can present complaints regarding alleged violations of this policy and have their complaints heard in accordance with the Title 5 regulations and those of other agencies that administer state and federal laws regarding nondiscrimination. No District funds shall ever be used for membership, or for any participation involving financial payment or contribution on behalf of the District or any individual employed by or associated with it, to any private organization whose membership practices are discriminatory on the basis of national origin, religion, age, gender, gender identity, gender expression, race, color, medical condition, genetic information, ancestry, sexual orientation, marital status, physical or mental disability, pregnancy, or military and veteran status, or because he or she is perceived to have one or more of the foregoing characteristics, or because of his or her association with a person or group with one or more of these actual or perceived characteristics. Inquiries regarding compliance and/or grievance procedures may be directed to: **Rancho Santiago Community College District Title IX Officer and Section 504/ADA Coordinator John Didion 2323 N. Broadway Santa Ana, CA 92706 Phone: (714) 480-7489**