



California State University
Dominguez Hills
 Financial Aid Office
 1000 East Victoria Street
 Carson, CA 90747
 (310) 243-3691

Name: _____
Last First MI
Student ID# _____

2018-2019 California Dream Act Verification Form - INDEPENDENT

Your 2018-2019 California Dream Act (CADA) application was selected for review in a process called verification. Some students are asked to validate the information provided on the CADA application to assure that the information provided is accurate. We will compare your CADA application with the information on this form and with any other required documents. If there are differences, your CADA application information may need to be corrected. You must complete and sign this form, attach copies of any required documents, and submit the form and other required documents to the CSUDH Financial Aid Office.

A. INDEPENDENT STUDENT’S FAMILY INFORMATION

List below the people in your household. Include:

- Yourself
- Your spouse, if you are married
- Your children, 23 years old and younger, if you will provide more than half of their support from July 1, 2018 – June 30, 2019, even if the children do not live with you.

Full Name	Age	Relationship	College*	Will be Enrolled at Least Half Time (Yes/No)*
		<i>Self</i>	<i>CSU Dominguez Hills</i>	

*Write in the space above information about any household member who is, or will be, enrolled at least half time in a degree, or undergraduate certificate program at an eligible postsecondary educational institution any time between July 1, 2018 and June 30, 2019, and include the name of the college.

Note: We may require additional documentation if we have reason to believe that the information regarding the household member enrolled in the eligible postsecondary educational institution is inaccurate.

If more space is needed, attach a separate page with your name and Student ID Number at the top.

B. STUDENT’S INCOME INFORMATION (Complete only **ONE** option in this section)

1. **TAX RETURN FILERS:** Complete this section if you (and/or your spouse, if married) filed a 2016 income tax return with the IRS.

Check the box that applies:

- I have attached to this form a copy of my (and my spouse’s, if married) **2016 Tax Return Transcript(s)**. A FREE of charge 2016 Tax Return Transcript may be obtained from the IRS by going online to:
 - www.irs.gov – Click on “Get My Tax Record” then select “Get Transcript ONLINE” or “Get Transcript by MAIL.” Make sure to request the “Return Transcript.”

Student's Name: _____

Student ID# _____

2. **AMENDED TAX RETURN FILERS:** If you (and/or your spouse, if married) **changed** or **corrected** your original 2016 federal income tax return filed with the IRS, you must submit both items listed below:
- A copy of your 2016 IRS Tax Return Transcript **AND**
 - Signed copy of your 2016 Amended U.S. Individual Income Tax Return (1040X) with all schedules attached that was filed with the IRS.
3. **NON TAX FILERS:** Complete this section if you (and your spouse, if married) **were not required** by federal law to file a 2016 income tax return with the IRS.
- Submit an **IRS Verification of Non-Filing Letter** dated on or after October 1, 2017 for yourself (and for your spouse, if married).
You may request the letter(s) FREE of charge from the IRS by going online to:
 - www.irs.gov – Click on “Get My Tax Record” then select “Get Transcript ONLINE” or “Get Transcript by MAIL.” Make sure to request the “Verification of Non-Filing Letter.”

AND

- **Check the box that applies:**

- I (and my spouse, if married) **was not employed** and had no income earned from work in 2016. I have listed below how I (and my spouse, if married) met basic living expenses (food, housing, etc.) and have included the dollar amount(s) and the source(s) of any support received in 2016 (e.g. monetary support from others, Veteran's Benefits, financial aid refunds, etc.).

Type of Assistance	2016 Amount Received

- I (and my spouse, if married) **was employed** in 2016 and have listed below the names of all employers and the amount earned from each employer in 2016, and have attached copies of all 2016 W-2 form(s) issued to me (and my spouse, if married) by employers. I have listed every employer even if the employer did not issue a W-2 form.

Employer's Name	2016 Amount Earned

Note: If more space is needed, attach a separate page with your name and Student ID Number at the top.

C. **CERTIFICATION AND SIGNATURE**

Each person signing below certifies that all of the information reported is complete and correct.

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

Student's Signature (Required)

Date

Spouse's Signature (Optional)

Date