



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 - DEPENDENT

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 and at least one parent 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. DEPENDENT STUDENT'S FAMILY INFORMATION

List the people in your **parent(s) household**. Include:

- Yourself
- Your parent(s) (including a stepparent if parent is remarried) even if you don't live with your parent(s)
- Your parent(s) other children, 23 years old and younger, as long as your parent(s) will provide more than half of their support from July 1, 2018 - June 30, 2019, or if the other children would be required to provide parental information if they were completing a CADA application or FAFSA for 2018-2019, even if they do not live with your parent(s).

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.

Student's Name: _____

Student ID# _____

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

1. **TAX RETURN FILERS:** Complete this section if you filed a 2016 income tax return with the IRS.

Check the box that applies:

- I, the student, have attached to this form a copy of my **2016 Tax Return Transcript**.
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.”

2. **AMENDED TAX RETURN FILERS:** If you **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 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 did not file and you **were not required** by federal law to file a 2016 income tax return with the IRS.

Check the box that applies:

- I, the student, **was not employed** and had no income earned from work in 2016.
- I, the student, **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 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. PARENT(S) INCOME INFORMATION (Complete only **ONE** option in this section)

If two parents (married or unmarried and both parents are living together) were reported in Section A of this form, the instructions and certifications below apply to both parents.

1. **TAX RETURN FILERS:** Complete this section if your parent(s) filed a 2016 income tax return with the IRS.

Check the box that applies:

- My parent(s) **2016 Tax Return Transcript(s)** is attached to this form.
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.”

2. **AMENDED TAX RETURN FILERS:** If your parent(s) **changed** or **corrected** their original 2016 federal income tax return filed with the IRS, you must submit both items listed below:

- A copy of their 2016 Tax Return Transcript(s) **AND**
- Signed copy of their 2016 Amended U.S. Individual Income Tax Return (1040X) with all schedules attached that was filed with the IRS.

Student's Name: _____

Student ID# _____

3. **NON-TAX FILERS:** Complete this section if your parent(s) **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 each parent that is listed in Section A of this form.
You may request the letter 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:**

- One or both of my parent(s) was **not employed** and had no income earned from work in 2016. *Please explain below how your parent(s) were able to meet the family's basic living expenses (food, housing, etc.). Include the dollar amount and the source of any support received in 2016 (e.g. monetary support from others, Veteran's Benefits, TANF, etc.).*

Type of Assistance	2016 Amount Received

- One or both of my parent(s) **was employed** in 2016. Listed below are the names of all of my parent(s)'s employers and the amount earned from each employer in 2016. Attached are copies of all 2016 W-2 forms issued to my parent(s) by their employer(s). I have listed every employer even if they 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.

D. 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

Parent's Signature (Required)

Date