

# Community Foundation

## FOR SOUTHEAST MICHIGAN

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### Renaissance of Values Scholarship Program Financial Information Form

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Student Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

#### Household Size

Your household size includes you, your spouse (if living at the same address) and all tax dependents (children and other family members who live with you and for whom you claim to have financial responsibility).

Number of people in household:      Adults \_\_\_\_\_      Children \_\_\_\_\_

#### Household Income

Your household income includes your Adjusted Gross Income from your last calendar year's federal income tax return (1040 or 1040A) and any additional income (Social Security benefits, public assistance, child support, untaxed pensions, etc.) Income or benefits should be listed under father, mother or received jointly (if joint tax return is filed). ***Please remember to use annual amounts: do not use monthly amounts.***

Income Source	Joint	Father's Wages and Benefits	Mother's Wages and Benefits
Adjusted Gross Income reported Federal Income Tax Return from the most recent fiscal year			
FIA or public assistance benefits			
SSI, Social Security (including children's benefits)			
Child Support			
Untaxed pensions or other benefit not itemized above			
Total Income for Each Column			

#### Documentation Requirements

You must provide documentation of your past year's income and household dependents, including the following items:

- Attach a copy of your signed Federal 1040 or 1040A tax return with your W-2 form and all schedules. Electronic filers should print out their return and sign it. Married couples filing separately must provide both tax returns. A free copy of your tax account is available from the IRS at (800) 829-1040: you must sign this document before submitting it.
- Attach documents of each additional source of income that does not appear on your Federal Income Tax Return for the past calendar year. Child support can be documented through Friend of the Court.

*I certify that all of the information provided on this application is true and correct to the best of my knowledge. I agree to provide proof that the statements made on this application are true and I acknowledge that failure to provide proof will invalidate this application.*

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Printed Name of Parent or Guardian

\_\_\_\_\_  
Date

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#### **Complete this section only if you did not file a Federal income tax return for the previous year**

In addition to making a notarized statement, you are still required to submit documentation of all income and dependent information.

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Notary Printed Name

\_\_\_\_\_  
Date

SEAL

*Please complete the second page if there has been a change in family circumstances.*

**Change in Family Circumstances**

If your income from the past calendar year is no longer representative of your current year income (or your current income) because of job loss, reduction in salary/wages or loss of benefits, please state your circumstances below:

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If needed, an additional page may be attached for greater detail.

This information is true and correct to the best of my knowledge and ability.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Printed Name of Parent or Guardian

\_\_\_\_\_  
Date

Please submit documentation for this year's income in the form of year-to date pay stubs, monthly benefit statements (Social Security, FIA, unemployment benefits, Workers Compensation).