

Project Year _____

STATEMENT OF FAMILY INCOME

CLIENT NAME _____ Independent Dependent
 PARENT NAME (If Minor or Dependent) _____
 NUMBER IN HOUSEHOLD _____

I (or my dependent) applied for services from the SWTJC Educational Opportunity Center (SWTJC EOC) and in order to satisfy Department of Education requirements to document family income, I certify that the following is true and correct to the best of my knowledge:

I, the Parent, am not required to file a Tax Return

My household is not required to file a Tax Return

The source(s) of income for 2021 were (check all that apply)

- Wages from employment in the amount of \$ _____
- SSI/Other Social Security Benefits in the amount of \$ _____
- Child Support in the amount of \$ _____
- Other Sources: _____ \$ _____

TOTAL INCOME FOR 2021 was: \$ _____

My household did or will file a 2021 tax Return, but no copy is available.

FILING STATUS	ADJUSTED GROSS INCOME	-	STANDARD DEDUCTION	=	TAXABLE INCOME
<input type="checkbox"/> Single	\$	-	\$ 12,550	=	\$
<input type="checkbox"/> Head of household	\$	-	\$ 18,800	=	\$
<input type="checkbox"/> Married Joint Return or Widowed with Dependent	\$	-	\$ 25,100	=	\$
<input type="checkbox"/> Married Filing Separate	\$	-	\$ 12,550	=	\$

COMMENTS: _____

The SWTJC-EOC representative has assured me that the information provided herein is considered **confidential** and is used only to determine eligibility for EOC services or other income-based opportunities that I, or my dependent, may seek.

Signature _____
 Client Parent of Minor/Dependent Client

Date _____