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2022-2023 CLARIFICATION OF LOW INCOME-INDEPENDENT

Printed Name:				
(Last)		(First))	(Initial)
Student ID #				
The 2020 student income reported on y will need additional information to dete does not apply to you, enter "none" or on them) to support your explanations.	ermine your fede "N/A". Attach ac	eral aid eliç	gibility. Student(s) please answer e	ach section below. If an item
2020 Income & Resources: Tell us how much you earned or Total Amount Received 2020		ned or rec	eived for the entire year. Please ans Benefit Received* Indicate Annual Am	
Your Income from Work	\$		Social Security Benefits*	\$
Your Spouse's Income from Work	\$		Supplemental Security Income*	\$
Business income (not reported above)	\$		AFDC/TANF*	\$
Unemployment Compensation	\$		Food Stamps*	\$
Pensions/Retirement	\$		Military Housing*	\$
Interest/Dividend Income	\$		WIC*	\$
Veterans Non-Educational Benefits	\$		Free/Reduced Lunch for Children*	\$
Child Support Received	\$		Subsidized Housing*	\$
Housing Allowance (clergy)	\$			
Other-explain:	\$			
Total Amount	\$		*Used for clarification only	
Attached is a copy of my/our 2017 IRS Tax Return Transcripts, and / or foreign tax return.			I/We did not file, and are not required to file, a 2017 federal income tax return. Please attach W-2s if income earned.	
Data Retrieval Tool Used				

1. Explain how you paid your living expenses for 2020. If you (the student) had no or few expenses in 2020, tell us why. (Living Expenses are housing, food, clothing, personal care etc.)