

FINANCIAL AID VERIFICATION WORKSHEET

STUDENT INFORMATION

Name: April Lambert
Student ID: al153
Academic Year: 2025/2026

HOUSEHOLD INFORMATION

Family Member	Age	Relationship	College (if attending)
April Lambert	24	Self	This Institution
Erin Miller	44	Parent	N/A
Brooke Henry	47	Spouse	N/A
Zachary Mendez	20	Sibling	N/A
Darlene Garcia	21	Sibling	N/A

INCOME VERIFICATION

Did you file a tax return for 2024? No
Reason for not filing: Extension requested
Income Earned from Work: \$33437

CERTIFICATION

By signing this worksheet, I certify that all the information reported is complete and correct to the best of my knowledge.

Student Signature: _____ Date: 03/29/2025
Parent Signature: _____ Date: 03/10/2025