FINANCIAL AID VERIFICATION WORKSHEET

STUDENT INFORMATION

Name: Sabrina Johnson Student ID: sj343

Academic Year: 2025/2026

HOUSEHOLD INFORMATION

| Family Member | Age | Relationship | College (if attending) |
|----------------------|-----|--------------|------------------------------------|
| Sabrina Johnson | 22 | Self | This Institution |
| Katherine Harrington | 59 | Parent | N/A |
| Shawn Rios | 21 | Sibling | Castro, Hughes and Kelly Universit |
| Mary Sheppard | 22 | Sibling | N/A |
| Carla Powell | 21 | Sibling | N/A |
| Samuel Estrada | 20 | Sibling | N/A |

INCOME VERIFICATION

Did you file a tax return for 2024? Yes Adjusted Gross Income: \$25631

Taxes Paid: \$3075

Income Earned from Work: \$23067

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: 01/29/2025 |
|--------------------|---|------------------|
| Parent Signature: | Ī | Date: 02/13/2025 |