FINANCIAL AID VERIFICATION WORKSHEET

STUDENT INFORMATION

Name: Lisa Dillon Student ID: ld550

Academic Year: 2025/2026

HOUSEHOLD INFORMATION

Family Member	Age	Relationship	College (if attending)
Lisa Dillon	23	Self	This Institution
Colleen Brown	45	Parent	N/A
Leslie Johnson	60	Parent	N/A
Michael Carter	19	Sibling	N/A
Jennifer York	19	Sibling	N/A
Rhonda Hernandez	18	Sibling	N/A

INCOME VERIFICATION

Did you file a tax return for 2024? Yes Adjusted Gross Income: \$29825

Taxes Paid: \$3579

Income Earned from Work: \$26842

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: 03/22/2025
Parent Signature:	Date: 02/26/2025