

CAMP

College Assistance Migrant Program

Chemeketa Community College



Income Verification and Release Form

Applicant's Name: _____ SSN/K#: _____

Step 1. Circle the number of people in your household.

Step 2. Look at **Taxable Income** figure across from the number you circled in Step 1.

Step 3. If your family's **Taxable Income** from last year's taxes (2007) was less than the amount in Step 2, circle Less. If it was more, circle More.

NOTE: Taxable income is not the same as your gross, or adjusted gross income. When looking at your taxes for 2007, look at the following lines: Form 1040 – Line 43; Form 1040A – Line 27; Form 1040EZ – Line 6.

Step 1 # of people in your household	Step 2 Taxable Income for 2007	Step 3 Was your Income Less or More?
1	\$15,600	Less or More
2	\$21,000	Less or More
3	\$26,400	Less or More
4	\$31,800	Less or More
5	\$37,200	Less or More
6	\$42,600	Less or More
7	\$48,000	Less or More
8	\$53,400	Less or More

(If there are more than 8 members in your family, please contact the CAMP office for assistance in determining the eligibility amount.)

Dependent and Underage Students: If you are a dependent and/or underage student, your parent must sign this form verifying the accuracy of the financial information on this form and authorizing the releases stated below. The income you report should be the combined income for your family.

- Statement:** To the best of my knowledge, the information that I have provided on this form is accurate and I am willing to provide tax forms or other documentation needed in order to verify this information.
- Media Release:** If you are accepted into the College Assistance Migrant Program (CAMP), there may be events where pictures are taken or video recording is occurring. I hereby give my permission for the program to use my pictures or recordings for use on radio, TV, printed media or in program documentation and promotional materials.
- Academic Information Release:** If you are accepted into the College Assistance Migrant Program (CAMP), the program staff will check with your instructors regarding your academic progress. This may occur through written or oral means and will be kept confidential. Your signature below indicates you give permission for the program staff to gather this information from your instructors and authorize your instructors to provide this information.
- Financial Information Release:** If you are accepted into the College Assistance Migrant Program (CAMP), the program staff will check with the Financial Aid Office regarding your financial situation. I hereby give staff members of the College Assistance Migrant Program (CAMP) permission to release/receive information regarding my financial situation to/from the Financial Aid Office, Chemeketa Foundation and other scholarship organizations.

Applicant's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____

Chemeketa Community College is an equal opportunity, affirmative action institution. To request this document in an alternate format, please call Disability Services at 503-399-5192 (V/TTY), or disability@chemeketa.edu.

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