



IRVINE VALLEY COLLEGE
Financial Aid Office
5500 Irvine Center Drive, Irvine, CA 92618
(949) 451-5287

2008-2009 EXPENSE CERTIFICATION

Name of Student: _____
(Last) (First) (Middle)

Social Security Number: _____ - _____ - _____ ID# _____

Yearly Expenses in 2007 (12 Months)

	STUDENT	PARENT(S) (Dependent students only)
Rent or Mortgage	\$ _____	\$ _____
Utilities	_____	_____
Insurance:	_____	_____
Home or Renter's	_____	_____
Auto	_____	_____
Other (i.e. life, theft)	_____	_____
Food	_____	_____
Car Payment	_____	_____
Transportation	_____	_____
Medical/Dental	_____	_____
Child Care	_____	_____
Child Support Paid	_____	_____
Credit cards	_____	_____
Loan payments	_____	_____
Other Misc. Expenses	_____	_____
Total for 2007	_____	Total for 2007 _____

All Students

1. Did someone, a friend or relative, pay for any of the expenses listed above for you/spouse in 2007?
 Yes No
2. Were you/spouse living with someone, a friend or relative, who was supporting you in 2007?
 Yes No

Dependent Students Only

1. Did someone, a friend or relative, pay for any of the expenses listed above for your parent(s) in 2007?
 Yes No
2. Were your parent(s) living with someone, a friend or relative, who was supporting them in 2007?
 Yes No

*****If you answered "Yes" to any of the questions listed above, please provide more information on the back of this form.**

Form continues on back (you must complete all sections).

TO BE COMPLETED IF YOU WERE SUPPORTED BY A FRIEND OR RELATIVE

If someone (a friend or relative) paid for any of your expenses in 2007 for you and/or spouse, please have them complete the following:

I/we certified that I/we supported this student in 2007 by providing the following:

\$ _____ Money paid to student in 2007.

\$ _____ Amount of support given for housing, food and any other general living expenses.

I certify that to the best of my/our knowledge this information is true and complete. I/we understand that false statements or misrepresentations will cause denial or repayment of financial aid.

Signature of Person Supporting Student Date

Signature of Person Supporting Student Date

Phone # _____

Phone # _____

TO BE COMPLETED IF YOUR PARENT(S) WERE SUPPORTED BY A FRIEND OR RELATIVE

If someone (a friend or relative) paid for any of your parent(s) expenses in 2007, please have them complete the following:

I/we certified that I/we supported this student 's parent(s) in 2007 by providing the following:

\$ _____ Money paid to parent(s) in 2007.

\$ _____ Amount of support given for housing, food and any other general living expenses.

I certify that to the best of my/our knowledge this information is true and complete. I/we understand that false statements or misrepresentations will cause denial or repayment of financial aid.

Signature of Person Supporting Parent(s) Date

Signature of Person Supporting Parent(s) Date

Phone # _____

Phone # _____

Certification of Information on this Form:

I/we certify that all the information reported on this form and any attachments to it are true, complete and accurate. I/WE UNDERSTAND THAT SUPPORTIVE DOCUMENTATION MAY BE REQUIRED AND THAT FALSE STATEMENTS OR MISREPRESENTATION WILL BE CAUSE FOR DENIAL, REDUCTION, WITHDRAWAL AND/OR REPAYMENT OF FINANCIAL AID.

Signatures are required for all persons reporting income on this form.

Signature of Student

Date

Signature of Parent

Date