

**Instructions for completing and submitting a
NOTARIZED STATEMENT OF INCOME**

1. Fill out CEF's NOTARIZED STATEMENT OF INCOME document as applicable.
2. Provide a Notary Public with proper documentation to prove your income and dependent(s).
3. Sign the document with a Notary Public or appropriate official as your witness.

The *NOTARIZED STATEMENT OF INCOME* is to be used only when Federal Income Tax Return(s) for the legal parent(s)/guardian(s) of a student is not available or if undeclared cash income for the household exists. The statement, along with proper documentation, should be submitted with your application to CEF. Failure to disclose all income sources (taxable and non-taxable) and provide appropriate proof will result in the denial of your application.



NOTARIZED STATEMENT OF INCOME

I/We, _____ and _____,
Print name of Legal Parent/Guardian A Print name of Legal Parent/Guardian B

hereby swear to be the legal guardian(s) of _____.
Print name of Student

My/Our relationship to this student is _____.
(Ex. parent, guardian, relative, sibling)

My/Our address is _____.

The following information summarizes income that I/we currently earn:

Parent/Guardian Name	Employer Name	Hours Worked per Week	Hourly Rate	Weekly Income

Other income that I/we receive (check all that apply and provide *monthly* amount):

- | | | |
|--|---|--|
| <input type="checkbox"/> Pension: \$ _____ | <input type="checkbox"/> Unemployment: \$ _____ | <input type="checkbox"/> Social Security: \$ _____ |
| <input type="checkbox"/> Section 8: \$ _____ | <input type="checkbox"/> CalWorks: \$ _____ | <input type="checkbox"/> CalFresh: \$ _____ |
| <input type="checkbox"/> Child Support: \$ _____ | <input type="checkbox"/> Disability: \$ _____ | <input type="checkbox"/> Alimony: \$ _____ |

The following person(s) is/are 100% dependent upon me/us for financial support (include student named above):

Dependent Name	Relationship to Legal Parent/Guardian	Age

I/We swear the information provided on this statement is true and correct, and includes *all* sources of income for my/our household.

Signature of Legal Parent/Guardian A

Signature of Legal Parent/Guardian B

NOTARY PUBLIC

This *Statement of Income* was sworn and subscribed to me on the _____ st/th day in the month of _____, 20____.

Notary Signature

Notary Stamp/Seal