Office of Financial Aid
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2026-2027 Dependent Income Exclusion Worksheet

Student Name:_____ SMC ID#_____

ENTER 0 FOR ANY ITEMS THAT DO NOT APPLY. DO NOT LEAVE ANY FIELDS BLANK!
REPORT CALENDAR YEAR 2024 INCOME INFORMATION

Student	Calendar Year 2024	Parent
$ _____	Child support paid because of divorce or separation or as a result of a legal requirement. **Don't include support for children included in your household on the 2026-2027 FAFSA.**	$ _____
$ _____	Taxable earnings from need-based employment programs such as Federal Work Study and need-based employment portions of fellowships and assistantships.	$ _____
$ _____	Taxable grant and scholarship aid **reported to the IRS as income.** Include AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant & scholarship portions of fellowships and assistantships.	$ _____
$ _____	Combat pay or special combat pay, **that was taxable and included in your (or your parents') adjusted gross income. DO NOT INCLUDE UNTAXED COMBAT PAY.**	$ _____
$ _____	Earnings from work under a cooperative education program offered by a college.	$ _____

2024 Child Support Paid
Did the student or parent pay child support because of divorce or separation during calendar year 2023? ☐YES ☐NO
(Do not include support paid for children included in household size.)

If yes, please provide the following:

Name of the person who paid the child support	Name of the person to whom the child support was paid	Name and age of the child for whom the child support was paid	Amount of child support paid in 2024.

CERTIFICATION: I certify that all the information reported on this form is true, complete and correct. I understand that any false statements could be cause for denial, reduction, withdrawal or repayment of financial aid.

Please print, sign and date before submitting. We CANNOT accept digital signatures.

_____ _____
Student Signature Date

_____ _____ _____
Parent Signature Parent Printed Name Date