



NEW HAVEN SCHOLARSHIP FUND

ALTERNATIVE INCOME VERIFICATION FORM

FOR APPLICANTS WHOSE PARENTS DON'T FILE A 1040 INCOME TAX FORM

This information will be kept confidential by the New Haven Scholarship Fund and will be used only for determining eligibility.

Student Name: _____

High School: _____

Annual Family Income: _____

Number in Household: _____

Names of People in Household	Age	Relationship

I certify that the above information is correct.

Parent Signature

Date

Student Signature

Date