

Program (Cooperative Agencies Resources for Education) Untaxed



Income Verification Agency Certification 2022/2023

CARE regulations require us to verify family's financial resources. The information provided below will be used only for CARE purposes and will be confidential per Sections 76200-76246 of the California Education Code and the 1947 Family Education Rights and Privacy Act.

		- to be completed by the stu	
"I authorize the appropriate office/agency to provide the information requested by Citrus College."			
Case Name under which benefits are issued (please print):			
Last	First	M.I.	Case Number
Student's Signature			Date
If you are currently receiving cash aid from CalWORKs/TANF please check here:			
Section B – to be completed by the agency:			
A. The above named student receiving CalWORKs/TANF (cash-aid) assistance for			
(please check all that apply):			
u	Self Spouse	□ Other	
· ————————————————————————————————————			
	Dependent Children		
B. The date this student began receiving CalWORKs/TANF assistance is://			
C. The student is in a one-parent assistance unit (single-head of household):			
D. Is the student named above currently being sanctioned by the County? INCLUDE AGENCY STAMP HERE			
	YES NO		
"As a represer both current a	ntative of this agency, I affirm th and correct."	nat the above provided informati	ion is
Printed Name			
Signature			
Official Title/Position			
Phone			
Date/	/		