



INCOME VERIFICATION

*Student Support Services/STEM Student Support Services
Seminole State College*

Student Name: _____

Student ID: _____

2021 **TAXABLE** Income: \$ _____ (line 15 of 2021 1040 Return)

Size of family unit: _____

I confirm, to the best of my knowledge, that the above listed information for my 2020 Annual Taxable Income is accurate.

Parent Signature*

Date

***dependent** students must have parent signature

TRIO office use only below

**Federal TRIO Programs
Current-Year Low-Income Levels**

(Effective **January 12, 2022** until further notice)

Size of Family Unit	48 Contiguous States, D.C., and Outlying Jurisdictions	Alaska	Hawaii
1	\$20,385	\$25,485	\$23,445
2	\$27,465	\$34,335	\$31,590
3	\$34,545	\$43,185	\$39,735
4	\$41,625	\$52,035	\$47,880
5	\$48,705	\$60,885	\$56,025
6	\$55,785	\$69,735	\$64,170
7	\$62,865	\$78,585	\$72,315
8	\$69,945	\$87,435	\$80,460