

UC LEADS Program Financial Statement

Please type or print legibly.

Applicant's Name _____

UID _____ *first, middle, last* Phone Number _____

Information on this Financial Statement will not affect the actual amount of support you may receive. The information you provide will be kept confidential in the Graduate Division. If you are receiving financial aid, you must also provide **Verification of Your Financial Aid Package** (e.g., financial aid transcript, award letter or contract). Your application for this program will not be considered complete without this information.

Section I: Extra Expenses for 2008-09

In this section indicate any special circumstances that would increase your legitimate expenses beyond those customarily experienced by undergraduate students. Please use additional sheets of paper if necessary.

Number of Dependents _____

Other pertinent information:

Section II: Parental/Sibling Information

Father's Occupation _____ Mother's Occupation _____

Will or did your parents claim you as an income tax exemption in 2008? Yes No

Number of siblings in your family: _____ Number of siblings who have attended college: _____ Number of siblings currently in college: _____

First generation on either side of your immediate family to attend a four-year college or university? (i.e., your father and mother did not receive a bachelor's degree.) Yes No

Name of the secondary/high school(s) you attended _____

Location _____

I hereby certify to the best of my knowledge that all the information submitted is complete and correct.

Applicant's Signature _____ Date _____