

Georgia Department of Human Services
VERIFICATION OF EDUCATIONAL ASSISTANCE INCOME

Does the school or program in which the student is enrolled require a high school diploma or equivalency certification for enrollment? Yes _____ No _____

Does the school or program in which the student is enrolled require a high school diploma or equivalency certification prior to completion of the program? Yes _____ No _____

Are there standard requirements to obtain the degree or certificate? Yes _____ No _____

Is the student enrolled at least halftime? Yes _____ No _____

List the student's sources of education assistance. (Include any PELL, BEOG, SSIG, Perkins, HOPE, Grants, Scholarships, Fellowship, Internships, Work Study Programs, etc.)

SOURCE	AMOUNT	PERIOD OF TIME COVERED		List type of expense and amounts of money specifically earmarked
		FROM	TO	

INTERNSHIPS ONLY

If the student is in an internship program, does the student receive earned income/wages and educational assistance? Is the student considered to be an employee and/or a student? Please explain below.

WORK STUDY

Is this student participating in a state or federally financed work study? Yes _____ No _____

School term of student work study program: _____

Work study start date: _____ End date: _____

Signature of School Official Completing This Form: _____

Title: _____

Telephone # _____

Date: _____