

Financial Aid and Scholarships
 University of California, Davis
 One Shields Avenue
 Davis, CA 95616-8596

FAX: (530) 752-1587
financialaid.ucdavis.edu
my.ucdavis.edu/ask_us

2016-2017 Domestic Partner Information Form

The California Domestic Partner Rights and Responsibilities Act of 2003, which extends new rights, benefits and obligations to individuals in California Registered Domestic Partnerships, became law on January 1, 2006. If you or your parent(s) are in a Registered Domestic Partnership, this legislation may affect your eligibility for state and university financial aid.

If you or your parent(s) were registered as a Domestic Partner at the time you completed your 2016-2017 FAFSA or Dream Act Application, you are required to request a reevaluation of your financial aid eligibility for state aid only. ***Please type the information required, or print clearly in blue or black ink. Do not leave any blanks; if none please enter N/A. This reevaluation may result in an increase or decrease in your financial aid eligibility.***

Student's Name: _____ Student ID: _____

Address (street, city, state, and zip): _____

Email Address: _____ Phone Number: _____

Please Tell Us Your Circumstance:

- I, the student, am registered in a domestic partnership.
- My parent is registered in a domestic partnership.

List the partner's legal dependents that live in the household and who receive more than half of their support from your or your parent's partner now and through June 30, 2017:

FULL NAME	DATE OF BIRTH (MO/DAY/YR)

PLEASE SUBMIT THE FOLLOWING DOCUMENTATION:

- Partner's 2015 Federal Tax Return Transcript, if filed. If not filed, sign the Statement of Non Filing on Page 2.
- Partner's 2015 income/asset information as required on page 2.
- One of the following:
 - A ***Declaration of Domestic Partnership*** form filed with the state and stamped by the CA Secretary of State's Office, **OR**
 - A ***Certificate of Domestic Partnership***, available upon request from the CA Secretary of State's Office **OR**
 - Documentation verifying a legal union entered into outside of California

Once complete, return both pages of this form and all documentation to the UC Davis Financial Aid and Scholarships office

PROVIDE YEARLY AMOUNTS FOR 2015**DO NOT LEAVE ANY QUESTIONS BLANK**

Please provide domestic partner's information. If a question does not apply to your situation, write 0.

ADDITIONAL FINANCIAL INFORMATION	PARTNER
Child support paid because of divorce or separation or as a result of a legal requirement. Do not include support for children in your (or your parents') household, listed on the front of this form.	\$
Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$
Taxable student grant and scholarship aid reported to the IRS in your adjusted gross income . Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$
Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Don't include untaxed combat pay.	\$
Earnings from work under a cooperative education program offered by a college.	\$
OTHER UNTAXED INCOME	
Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings) including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S.	\$
Child support received for any of your children. Don't include foster care or adoption payments.	\$
Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.	\$
Veterans' noneducation benefits, such as Disability, Death Pension or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.	\$
Other untaxed income not reported, such as workers' compensation, disability, etc. Do not include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$
Money received, or paid on your behalf (e.g. bills), not reported elsewhere on this form	\$
ASSET INFORMATION	
Cash/Savings/Checking accounts	\$
Other Assets (i.e. trust funds, stocks, money market accounts, other securities, etc)	\$
Net Value of real estate other than primary residence (value – debt = net value)	\$
Net Value of Current Business or Partnership (if Partnership, list your % of value only; value – debt = net value)	\$
Net Value of Farm (value – debt = net value)	\$

Partner's Statement of Non-Filing: If you did not file a 2015 federal tax return, please sign below:**Partner's Signature:** _____ **Date:** _____**SIGNATURES:** (For independent students, your parent's partner must sign. For independent students, your partner must sign)

I/we certify that all information reported on or submitted with this form is complete and correct to the best of my/our knowledge. I/we understand that if I/we purposely give false or misleading information to qualify for financial aid, I/we may be subject to prosecution which may result in a fine, a prison sentence, or both.

Student's Signature: _____ **Date:** _____**Student's Partner / Parent's Partner's Signature:** _____ **Date:** _____

- Reminders:
- Attach copies of all 2015 Federal Return Tax Transcript
 - Write student name and student I.D. number on all documents submitted
 - Payments will not disburse until we have reviewed your documents and verified your eligibility