



# PROSPERITY DENVER FUND

## Financial Need Affidavit

The purpose of this document is to confirm that the below-named learner meets the financial need requirement for their training provider to receive reimbursement funding from Prosperity Denver Fund.

**Learner First and Last Name:**

**Date of Birth:**

**Training Provider:**

**1. Did you complete the Free Application for Federal Student Aid (FAFSA) for your first year of post-secondary education?**

- Yes
- No (if no, you may skip to question 4)

**2. Did you receive a Federal Pell Grant for your first year of post-secondary education?**

- Yes (if yes, you may skip the remaining questions and sign on the final page)
- No

**3. What was your Expected Family Contribution (EFC)\* for your first year of post-secondary education?**

*If EFC is provided, you may skip the remaining questions and sign on the final page*

*Your EFC is displayed in the upper right-hand corner of your FAFSA Student Aid Report (SAR)*

**4. Were you eligible for Free and Reduced-Price Lunch during high school?**

- Yes
- No



# PROSPERITY DENVER FUND

**5. Please check any of the boxes below that your household is currently receiving:**

- Temporary Assistance for Needy Families (TANF) Benefits
- Supplemental Nutrition Assistance Program (SNAP) Benefits
- Medicaid Eligibility
- Supplemental Security Income (SSI) or Disability Benefits
- Section 8 Housing Vouchers
- Women, Infants, and Children (WIC) Benefits
- An income that is too low to require a Federal Income Tax Filing

**6. Is your total gross household annual income at or below 60% of Area Median Income (AMI) ?**

- Yes
- No

**6.6. Is your total gross household annual income between 61-80% of Area Median Income (AMI) ?**

- Yes
- No

By signing below, I authorize my training provider to release the information specified in this document to Prosperity Denver Fund. I confirm that the information provided is accurate to the best of my knowledge.

Signature of Learner

Signature Date

---

---