

UW-La Crosse Financial Aid
2009 – 10 Verification Worksheet For Dependent Students

FA2-09/10(05/09)D

Your financial aid application was selected for review in a process called “verification”. In this process, the Financial Aid Office will be comparing the information provided on this form and on your tax returns to the information you provided on your *Free Application for Federal Student Aid* (FAFSA). If there are any differences between your FAFSA information and your financial documents, your FAFSA data may be corrected.

Return this form as soon as possible to avoid delay in receiving your financial aid.

A. Student Information

Last name	First name	M.I.	Social Security # or UW-L student ID #
Permanent Address (include apt. no.)			Date of Birth
City	State	ZIP Code	Phone number (including area code)

B. Family Information

List all the people in your parents’ household who will be supported by your parents between July 1, 2009 and June 30, 2010.

Be certain to include:

- Your parent(s) (include step parent) and yourself (even if you do not live with your parents).
- Your parents’ other children (if they will receive more than half their support from your parent(s) or are considered dependent students when they apply for federal financial aid). Don’t include children for whom child support is paid, nor foster children.
- Other people if they now live with your parents and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010. Do not include foster children.

Relationship to Student	Name	Age	College Attending 2009-10 (at least half time)	Grade Level
<i>You (self)</i>			UW-La Crosse	
<i>Parent</i>				
<i>Parent</i>				
<i>Sibling(s)/Others</i>				

Use extra page if necessary to list family members.

C. Untaxed Income

List by source the amounts reported on FAFSA Untaxed Income section. If an amount is “0” write “0”. **Do not leave any blanks.**

2008 Untaxed Income (Source)	Student (2008 total)	Parent(s) (2008 total)
Payments to tax-deferred plans (Listed on W-2 forms, box 12a through 12d, codes D, E, F, G, H, and S)	\$	\$
Child Support Received Date support will end: (Do not include foster care or adoption payments)	\$	\$
Housing, Food, and Other Living Allowances (e.g. for Military & Clergy) (Attach copy of statement if available)	\$	\$
Veterans Non-Educational Benefits	\$	\$
Worker’s Compensation	\$	\$
Money received or paid on your behalf (e.g. bills) not reported elsewhere on this form	\$	\$
Other	\$	\$

(OVER)

D. Additional Financial Information

List by source the amounts reported on FAFSA Additional Financial Information section. If an amount is "0" write "0". **Do not leave any blanks.**

2008 Additional Financial Information	Student (2008 total)	Parent(s) (2008 total)
Child support PAID out because of divorce or separation. (Provide names of children. Do NOT include support of children listed in Section B.)	\$ _____	Names of children receiving support: \$ _____ _____ _____
Taxable earnings from Federal Work Study	\$ _____	\$ _____
Student grant, scholarship, fellowship, and assistantship aid, (including AmeriCorps awards) that was reported to the IRS in your adjusted gross income on Federal tax form.	\$ _____	\$ _____
Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Combat pay is reported on the W-2 in Box 12, Code Q.	\$ _____	\$ _____

E. Tax Filing Status

Indicate your and your parent(s) 2008 tax filing status by checking the appropriate box.

Student

Parent(s)

I have enclosed a signed copy of my 2008 federal tax form.

I have not and am not required to file a 2008 federal tax return.

(You must complete the chart below).

If you have worked but were not required to file a 2008 federal income tax return, list below your employer(s) and any income received in 2008. Attach copies of W-2(s) from your employer(s), if available, to verify income reported below.

STUDENT Employer's Name or Source of income	Amount earned in 2008
TOTAL	\$ _____

PARENT Employer's Name or Source of income	Amount earned in 2008
TOTAL	\$ _____

F. Sign This Worksheet

I certify that all information reported to qualify for federal student aid is complete and correct.

Student Signature

Date

Parent Signature

Date

Mail **this signed form, federal tax return(s) and W-2(s)** to:

UW La Crosse Financial Aid Office
1725 State St ; 215 Graff Main Hall
La Crosse, WI 54601

Telephone 608 785-8604
Fax # 608 785-8843
e-mail: finaid@uwlax.edu
www.uwlax.edu/finaid

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail or both.