

UNIVERSITY OF ALASKA

A Multi-Campus System

2008-2009 Verification Worksheet

Office Use Only

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**IF YOUR TOTAL INCOME IS LESS THAN \$8000, YOU MAY BE REQUIRED TO COMPLETE A LOW INCOME EXPLANATION FORM
 PLEASE REVIEW THE WORKSHEET FOR ACCURACY OF INFORMATION AND FOR APPROPRIATE SIGNATURES**

Note: Federal regulations require that the Verification Worksheet form be completed before federal funds (Pell Grants, SEOG, Stafford loans, and Federal Work-Study) can be disbursed.

A. STUDENT INFORMATION:

_____	_____	_____	_____	_____
Last Name	First Name	MI	SSN	UA Student ID
_____	_____	_____	_____	_____
Address	E-Mail		Date of Birth	
_____	_____	_____	_____	_____
City	State	Zip	Home Phone	Cell Phone

B. HOUSEHOLD INFORMATION

Current marital status of Student (if independent):

- Separated/divorced/widowed Single Married

Current marital status of Parent (if student is considered dependent for financial aid purposes)

- Separated/divorced/widowed Single Married

- ✓ **Independent Students:** List the people in your household, include: (a) yourself, and your spouse if you have one; (b) your children, if you will provide more than half of their support from July 1, 2008 through June 30, 2009; and (c) any other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2008 through June 30, 2009.
- ✓ **Dependent Students:** List the people in your parents' household, include: (a) yourself and your parent(s) (including stepparent) even if you don't live with your parents; (b) your parents' other children, even if they don't live with your parents(s) if (1) your parents will provide more than half of their support from July 1, 2008 through June 30, 2009, or (2) the children would be required to provide parental information when applying for Federal student aid; and (c) 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, 2008 through June 30, 2009.
- ✓ **Write the names of ALL household members.** Also write in the name of the college for any family member, excluding your parent(s), who will be attending college, at least half-time between July 1, 2008 and June 30, 2009 and will be enrolled in a degree or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	Name of College	Attending Fall?	Attending Spring?
		Self			

C. STUDENT & SPOUSE (IF APPLICABLE)

C-1 2007 Untaxed income: (If none, enter \$0 - Do Not Leave Blank)

- \$ _____ Welfare benefits, including TANF. Do not include food stamps
- \$ _____ Social Security benefits received in your name.
- \$ _____ Veterans' non-education benefits and/or VA Educational Work-Study allowances
- \$ _____ Money received, or paid on your behalf (e.g., bills). Dependent Students -Do not include amounts received from or paid by a parent.
- \$ _____ Housing, food, and other living allowances paid to members of the military, clergy, and others. (Include cash payments and cash value of benefits.)
- \$ _____ Any other untaxed income or benefits not reported elsewhere

C-2 2007 Child Support (If none, enter \$0 - Do not leave blank.)

- \$ _____ Child support received for ALL children in your household.
- \$ _____ Child support paid (Do not include support for children in your household).

C-3 2007 Federal Income Tax Return (If none, enter \$0 - Do not leave blank.)

- Have filed** **Will not File**

If you will not file a tax return, list below all sources of income and amounts from work.

- \$ _____
- \$ _____
- \$ _____

D. PARENTS INFORMATION REQUIRED (IF STUDENT IS DEPENDENT)

D-1 2007 Untaxed income: (If none, enter \$0 - Do Not Leave Blank)

- \$ _____ Welfare benefits, including TANF. Do not include food stamps or subsidized housing. Untaxed Social Security benefits received for parent, **and benefits received by parents for other household members.**
- \$ _____ Veterans' non-education benefits and/or VA Educational Work-Study allowances.
- \$ _____ Housing, food, and other living allowances paid to members of the military, clergy, and others. (Include cash payments and cash value of benefits.)
- \$ _____ Any other untaxed income or benefits not reported elsewhere.

D-2 2007 Child Support (If none, enter \$0: Do not leave blank.)

- \$ _____ Child support received for ALL children in your household.
- \$ _____ Child support paid (Do not include support for children in your household).

D-3 2007 Federal Income Tax Return (If none, enter \$0 - Do not leave blank.)

- Have filed** **Will not File**

If you will not file a tax return, list below all sources of income and amounts.

- \$ _____
- \$ _____

E. CERTIFICATION:

By signing this form, we certify that all the information reported is complete and accurate. If dependent at least one parent must sign.

Student's signature: _____ Date: _____

Parent's signature: _____ Date: _____