



2009-2010 VERIFICATION WORKSHEET

A. Student Information

Independent

Last Name	First Name	M.I.	Social Security Number
Address (include apt. no.)			Date of Birth
City	State	Zip	Phone Number
			Student ID

B. Family Information

Your marital status as of the date this form is completed:

- Married/Remarried Divorced/separated
 Single Widowed

Month and year you were married, separated, divorced or widowed:

_____ / _____
 Month Year

In the table below, list the people in your household:

- yourself and your spouse,
- your children, if you will provide more than half of their support between July 1, 2009 and June 30, 2010,
- other people, if they now live with you, you provide more than half of their support and you will continue to provide more than half of their support between July 1, 2009 and June 30, 2010.

List Names below:

Full Name	Age	Relationship to Student	Name of college attending 2009-2010 at least half time in a degree, diploma or certificate program
		Self	UMass Dartmouth

C. Federal Tax Information

Student/Spouse

	I (we) have filed a 2008 federal income tax return. Check and attach 2008 Federal Income Tax Return. Include all W-2 forms and all schedules.
	I (we) have filed for extension from the IRS. Attach copy of IRS Form 4868.
	I (we) did not file and am not required to file a 2008 tax return. Attach all W-2 Forms received for wages earned in 2008.

If you do not have a copy of your tax return, contact the IRS at 1-800-829-1040 to request an IRS tax transcript.

COMPLETE ALL OF THE FOLLOWING QUESTIONS. Do no leave any items blank. If the answer is zero, answer as “0”.

Student/Spouse(Q46)

2008 Additional Financial Information

\$	a. Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040 – line 50 or 1040A – line 31.
\$	b. Child support paid because of divorce or separation or as a result of a legal requirement. Don't include support for children in your (or your parents') household, as reported on the FAFSA.
\$	c. Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.
\$	d. Grant and Scholarship aid reported to the IRS in the adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.
\$	e. Combat pay or special combat pay. Only enter the amount that was taxable and included in the adjusted gross income. Do not enter untaxed combat pay reported on the W-2 (Box 12, Code Q).

Student/Spouse (Q47)

2008 Untaxed Income

\$	a. Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including amounts reported on the W-2 form in Boxes 12a through 12d, codes D,E,F,G,H, and S.
\$	b. IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans from IRS Form 1040 – line 28 + 32 or 1040A – line 17.
\$	c. Child support received for all children. Do not include foster care or adoption payments.
\$	d. Tax exempt interest income from IRS Form 1040 – line 8b or 1040A – line 8b.
\$	e. Untaxed portions of IRA distributions from IRS Form 1040 – lines (15a minus 15b) or 1040A – lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.
\$	f. Untaxed portions of pensions from IRS Form 1040 – lines (16a minus 16b) or 1040A – lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.
\$	g. Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).
\$	h. Veterans non-education benefits such as Disability, Death Pension, or Dependency and Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.
\$	i. Other untaxed income or benefits not reported such as worker's 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, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.
\$	j. Money received, or any money paid on your behalf (e.g. bills), not reported elsewhere on this form.

Signature/Certification

By my signature, I certify that all information submitted with and written on this application is complete, accurate, and that corrections may be made based on data provided.

Student Signature

Spouse Signature (Required if Applicable)

Date ____ / ____ / ____