

DEPENDENT STUDENT VERIFICATION



Academic Year 2009–2010

DIRECTIONS

PLEASE read carefully and complete the entire form or it will be returned. Your application was selected for review in a process called “verification.” You will lose your financial aid unless you complete and submit this form, with all requested documentation attached, by your last date of eligible enrollment, or the date listed below that corresponds with your last term of enrollment, whichever is first:

- **Fall term 2009: December 4, 2009**
- **Spring term 2010: April 23, 2010**
- **May/summer 2010: July 16, 2010**

In this verification process we compare the information you provided on this form and your 2008 tax returns to the information provided on your *Free Application for Federal Student Aid* (FAFSA). If the information from your application and your financial documents differs, your application data will be corrected. Your financial aid award amounts will reflect those changes. **Make sure you write your (the student’s) name and Social Security number on all tax documents submitted.**

To complete online, open in Adobe Reader (free at Adobe.com), not a Web browser, to protect your private information. Place the cursor in a field and type. Print each page when completed. Add the required signature(s) in blue or black ink.

Return this form

By mail to:

One Stop Student Services
University of Minnesota, Twin Cities
200 Fraser Hall, 106 Pleasant St. SE
Minneapolis, MN 55455-0422

On campus at:

200 Fraser Hall, East Bank
130 West Bank Skyway, West Bank
130 Coffey Hall, St. Paul

Questions?

Phone: 612-624-1111
TTY (hearing impaired): 612-626-0701
E-mail: helpingu@umn.edu

STEP 1. Student information

Student name (Last, first, MI)	Birthdate	Social Security number	University ID
--------------------------------	-----------	------------------------	---------------

STEP 2. U.S. or foreign income

STUDENT SECTION

As a student, have you filed or are you planning to file a 2008 federal or foreign income tax return?

- Yes No, but I did work in 2008 No, did not work in 2008

If you answered:

- YES, you are required to return this completed, signed form, along with a **signed copy** of your 2008 tax return.
- NO, BUT I DID WORK IN 2008, complete the table below using your W-2 forms. Return this completed, signed form.
- NO, DID NOT WORK IN 2008, skip the table below and continue to the Parent section.

Name of employer or source of income	2008 student income amount
	\$
	\$
	\$

Continue with the Parent section below.

PARENT SECTION

As a parent, have you filed or are you planning to file a 2008 federal or foreign income tax return?

- Yes No

If you answered:

- YES, you are required to return this completed, signed form, along with a **signed copy** of your 2008 tax return and all W-2 earnings statements.
- NO, but you worked in 2008, complete the table below. Return this completed, signed form, with copies of all your W-2 earnings statements attached.

Name of employer or source of income	2008 parent income amount
	\$
	\$
	\$

Please go to STEP 3, page 2.



To request copies of this form in an alternative format, please call the Disabilities Services liaison for financial aid at 612-625-9578. The University of Minnesota is an equal opportunity employer and educator.

STEP 3. 2008 annual untaxed income for tax and non-tax filers

If you answer "yes" to any of the questions below, write the total dollar amount for the year (not month) in the right-hand column(s) of any untaxed income you or your parent(s) received during 2008. (Multiply a monthly amount by 12 for the annual total.)	Student's 2008 untaxed income	Parent(s) 2008 untaxed income	
Did you or your parent(s) receive 2008 child support payments? Do not include foster care or adoption payments.	<input type="checkbox"/> yes <input type="checkbox"/> no	\$	\$
Did you or your parent(s) receive in 2008 housing, food, or other living allowances for students, members of the military, clergy, and others (including cash payments and cash value of benefits).	<input type="checkbox"/> yes <input type="checkbox"/> no	\$	\$
Did you or your parent(s) receive in 2008 Veterans non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-study Allowances?	<input type="checkbox"/> yes <input type="checkbox"/> no	\$	\$
Did you or your parent(s) receive in 2008 other untaxed income not reported, such as workers' compensation, disability, etc? <u>Don't include</u> student aid, earned income credit, child care tax credit, welfare payments, untaxed Social Security benefits, Workforce Investment Act educational benefits, Combat pay (if you are not a tax filer), benefits from flexible spending arrangements (e.g. Cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	<input type="checkbox"/> yes <input type="checkbox"/> no	\$	\$
In 2008 did you or your parent(s) receive cash or money paid on your behalf (e.g. bills), not reported elsewhere on this form? Name the source:	<input type="checkbox"/> yes <input type="checkbox"/> no	\$	\$
TOTAL ANNUAL AMOUNT OF ALL 2008 UNTAXED INCOME		\$	\$

STEP 4. Parental household information

- A. List members in your parents' household**, along with their birth dates and Social Security numbers. Include the following:
- yourself and your parent(s) (including a stepparent) even if you do not live with your parents.
 - your parents' other children if (a) your parents provide **more than half their support** from July 1, 2009, through June 30, 2010, or (b) the children would be required to provide parental information when applying for federal financial aid.
 - other people if they now live with your parents, receive more than half their support and will continue to receive more than half their support from your parents from July 1, 2009, through June 30, 2010.
- B.** If any member of your parents' household—other than a parent or stepparent—is or will be **enrolled in a degree or certificate program at least half time** between July 1, 2009 and June 30, 2010, list the postsecondary institution s/he will attend along with her/his Social Security number. You may be required at a later date to provide confirmation of enrollment for all household members attending college at least half time.

Name	Birth date	Relationship to student	Post-secondary institution s/he will attend at least half time from July 1, 2009 to June 30, 2010	Social Security number
1.		self	University of Minnesota, Twin Cities	
2.		father/stepfather	Not applicable	
3.		mother/stepmother	Not applicable	
4.				
5.				

More than five household members? YOU ARE REQUIRED TO ATTACH A LIST of the additional household members. Your list must provide all of the information requested above for each additional person listed. Your aid may increase with this information.

STEP 5. Certification

You (and your parent) are required to sign and date this certification section. By signing this form, I/we certify that all the information I/we have reported on this form to qualify for federal student aid is complete and correct.

Student signature (required)	Date signed
Parent signature (required)	Date signed