

2023-2024 Verification Worksheet (Independent Student)

Your application was selected for review in a process called "Verification". The Financial Aid Office is required to compare information you reported on your FAFSA, to your <u>2021 Form 1040/U.S. Income Tax Return</u> and other required documentation. If there are differences between your FAFSA information and the documents you provide, Viterbo will make corrections to your FAFSA.

PLEASE PRINT LEGIBLY ON THIS FORM AND USE BLACK INK

PLEASE PRINT LEGIBLY ON THIS FORM AND USE BLACK TINK.									
A. Student Information									
Last Name First Na		M.I. (VU ID#) or (Last 4 or	digits of SSN)						
B. Income Questionnaire									
Did you (student)/your spouse file a 2021 (*If your answer is "No" you must co		1040/ US Income Tax Return? YES Section C. If your answer is "Yes" you ma							
C. Student/Spouse 2021 Income Information									
I certify that I/we were not required to file a 2021 Form 1040/US Income Tax Return because (check one):									
a. I/we had no income earned from working in calendar year 2021.									
b. I/we had total income earned from working of \$in 2021, less than IRS filing minimum (Must include copies of student/spouse 2021 W-2 and 1099 forms with this worksheet.)									
D. Student Household Information									
List the following people: 1. Your Spouse, if you are <u>currently married and living together</u> .									
If you are NOT married, check here and continue on reverse:									
Spouse Full Name	Age	Name of College Your Spouse Will Attend <u>AT LEAST HALF TIME</u> Fall 2023 and/or Spring 2024 (Enter "None" if not applicable)	Type of Degree Program During Fall 2023 and/or Spring 2024 (Associate, Bachelor, Advanced)						

Student Last Name	Ident Last Name (VU ID#) or (Last 4 of SSN) Student Household Information (cont.) [You may be asked to provide proof of support for anyone listed in #4]									
 Your Children. List your chil Attach extra pages if necessar 		ney will live with yo	u <u>and</u> will receive m	ore than half of	their support from you/your spouse	from July 1, 2023 to June 30, 2024.				
. Others. List other persons if extra pages if necessary.	they will	live with you and	receive more than h	nalf of their suppo	ort from you/your spouse from July 1	, 2023 to June 30, 2024. Attach				
. CHECK HERE IF YOU HAVE	ио сни	DREN OR OTHER	S LIVING IN YOUR	HOUSEHOLD A	S DEFINED IN D2 OR D3 ABOVE:					
Full Name of Person Who Meets Criteria D2 or D3	Name of Person Who Age Relationship		Primary Residence with Student (7/2023 to 6/2024)? Yes or No	This Person is Employed at Least 30 Hrs/Week?	Name of College This Person W Attend <u>AT LEAST HALF TIME</u> Fall 2023 and/or Spring 2024 (Enter "None" if not applicable	Fall 2023 and/or Spring 2024				
-					ne courts to support your answer	<u> </u>				
. CHECK HERE IF NO ONE IN Y	OUR HO	DUSEHOLD RECEI	VED CHILD SUPPO	RT IN <u>2021</u> :	(Be prepared to submit agen	cy or court documents upon reques				
Name of Household Member V	eived Child Suppo	ort Name(s)	of Children for W	Amount of Support Received in 2021						
F. Sign this Workshee	et									
		nformation reporte	d is complete and co	rect. I will report	changes to this information promptly	<i>i</i> .				
Student signature										
WARNING: If you p	urpose	y give false or	misleading infor	mation on this	worksheet, you may be fined	d, sent to prison, or both.				

Return this form to: Financial Aid Office – Viterbo University 900 Viterbo Drive La Crosse, WI 54601 (to submit form) Email: FinancialAid@viterbo.edu (to submit questions) Phone: (608) 796-3900 Email: FAdocuments@viterbo.edu (to submit form) Fax: (608) 796-3859