

2022-2023 Verification Worksheet (Dependent Student)

Your financial aid application was selected for review in a process called "Verification". The Financial Aid Office must compare information you reported on your FAFSA to your and your parents' **2020 Form 1040/U.S. Income Tax Returns** 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. |
|--|---|
| A. Student | Information |
| | |
| Last Name | First Name M.I. (VU ID#) or (Last 4 digits of SSN) |
| B. Income | Questionnaire |
| | student) file a <u>2020 Form 1040/ US Income Tax Return</u> ? YES NO* answer is "Yes" you may skip <u>Section C</u> .) |
| | parent(s) file a <u>2020 Form 1040/ US Income Tax Return</u> ? YES NO* answer is "No" you must complete <u>Section D</u> .) |
| C. Student | 2020 Income Information |
| I certify that | I was not required to file a 2020 Form 1040/US Income Tax Return because (check one): |
| a. Il | nad no income earned from working in calendar year 2020. |
| | nad total income earned from working in the amount of \$in 2020, less than the IRS ling minimum. (<u>Must include copies of student 2020 W-2 and 1099 forms with this worksheet</u> .) |
| D. Parent(s |) 2020 Income Information |
| I certify that because (<u>che</u> | my FAFSA parent(s) were <u>not required to file</u> a <u>2020 Form 1040/ US Income Tax Return</u> eck one): |
| a. P | arent(s) had no income earned from working in calendar year 2020. |
| | arent(s) had total income earned from working in the amount of \$ in 2020, less than the RS filing minimum. (<i>Must include copies of parent 2020 W-2 and 1099 forms with this worksheet.</i>) |
| E. Parent H | lousehold Information |
| are now, and will b | g people: i). List information for your biological, adoptive and/or stepparent(s) even if you do not live with them, but they be (July 1, 2022 – June 30, 2023) part of your primary household. If your parents are separated or divorced, parent/stepparent whose information you were <u>required</u> to provide on the FAFSA. |

Age

Parent/Stepparent Full Name

Relationship to Student

(Select One)

Stepparent

Stepparent

Parent /

Parent /

| Stu | dent Last Name | | | | | | | | | |
|--|--|------------------|---|---|--|----------------------------------|--|--------------------------------------|--|--|
| <u>E.</u> | Parent Household Infor | matio | n (cont.) | You may be as | ked for proof of | support provided by parent | <u>(s).]</u> | | | |
| 2. | Your Siblings. List any sibling(s) who will live with <u>and</u> receive <u>more than half</u> of their support from the parent(s), reported in E1, from July 1, 2022 to June 30, 2023 or, if your sibling would be required to provide parent information on the 2022-2023 FAFSA. Attach extra pages if necessary. | | | | | | | | | |
| 3. | Others. List other persons if they will live with your parent(s) from July 1, 2022 to June 30, 2023 and will receive more than half of their support from the parent(s), reported in E1, during this 12-month period. Attach extra pages if necessary. Proof of parental support maybe requested as a follow-up to your responses. | | | | | | | | | |
| 4. CHECK HERE IF THERE ARE NO SIBLINGS OR OTHERS LIVING IN YOUR PARENT'S HOUSEHOLD AS DEFINED IN E2 OR E3 ABOVE: | | | | | | | | | | |
| | Full Name of Person Who Meets E2 or E3 Criteria Age to Student | | Primary Residence Will be With Parent (7/2022 to 6/2023)? Yes or No | This Person is Employed at least 30 Hrs/Week? Yes or No | Name of College This Person Will Attend <u>AT LEAST HALF TIME</u> <u>Fall 2022</u> and/or <u>Spring 2023</u> (Enter "None" if not applicable) | | Type of Degree Program During Fall 2022 and/or Spring 2023 (Associate, Bachelors, Masters, PhD, etc.) | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| F. | Child Support Received | in 20 | 20 [You may | be asked for pro | oof from the cou | urts to support your answers | s in this s | section.] | | |
| 1. | Report information below for any memb | er of par | ent's household | who received child | d support payme | nts in 2020 (attach additional s | heet if ne | eded): | | |
| 2. | CHECK HERE IF NO ONE IN YOUR HO | USEHOL | D RECEIVED CH | ILD SUPPORT | IN 2020: (I | Be prepared to submit agend | y or cou | rt records upon request) | | |
| Name of Household Member Who Received Child Support | | | | Name(s) of Children for Whom Child Support was Paid | | | Amount of Support Received in 2020 | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | Sign this Worksheet | | | | | | | | | |
| | signing this worksheet, we certify the FSA* parent must sign this form.) | at the in | formation repo | rted is complet | e and correct. | I will report any changes pro | omptly. | (The student and <u>at least one</u> | | |

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

Parent signature

Date

[*must be a parent whose financial data (income, assets) is reported on the 2022-23 FAFSA]

Date

Return this form to: Financial Aid Office - Viterbo University 900 Viterbo Drive La Crosse, WI 54601

Email: FAdocuments@viterbo.edu (to submit form) Email: FinancialAid@viterbo.edu (to submit questions) Phone: (608) 796-3900 Fax: (608) 796-3859

Student signature