

2022-2023 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 **2020 Form 1040/U.S. Income Tax Return** 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 PR	INT LEG	IBLY ON THIS FORM AND USE BLACK INK.	
A. Student Information			
Last Name First N	Name	M.I. (VU ID#) or (Last 4 or	digits of SSN)
B. Income Questionnaire			
Did you (student)/your spouse file a 202 (*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/Spause 2020 In	como	Toformation	
C. Student/Spouse 2020 In	Come	e iniormation	
I certify that I/we were <u>not required</u>	to file	a 2020 Form 1040/US Income Tax Return b	ecause (<u>check one</u>):
a. I/we had no income earn	ned fron	n working in calendar year 2020.	
b. I/we had total income ea (<u>Must include copie</u> s	arned fr	om working of \$in 2020, le dent/spouse 2020 W-2 and 1099 forms wit	ess than IRS filing minimum. h this worksheet.)
D. Student Household Infor	mati	on	
List the following people: 1. Your Spouse, if you are <u>currently</u>	<u>marrie</u>	d and living together.	
If you are <u>NOT married</u> , check here and o	continue	on reverse:	
Spouse Full Name	Age	Name of College Your Spouse Will Attend <u>AT LEAST HALF TIME</u> Fall 2022 and/or Spring 2023 (Enter "None" if not applicable)	Type of Degree Program During Fall 2022 and/or Spring 2023 (Associate, Bachelor, Advanced)

dent Last Name	d Inf	ormation (c	ont.) [You may		U ID#) or (Last 4 of SSN) vide proof of support for anyone li	sted in #4]	
Your Children. List your child Attach extra pages if necessar		ey will live with yo	u <u>and</u> will receive m	ore than half of	their support from you/your spouse from	om July 1, 2022 to June 30, 2023.	
Others. List other persons if the extra pages if necessary.	hey will	live with you <u>and</u> r	receive more than h	nalf of their suppo	ort from you/your spouse from July 1, 2	2022 to June 30, 2023. Attach	
CHECK HERE IF YOU HAVE I	NO CHIL	DREN OR OTHER	S LIVING IN YOUR	R HOUSEHOLD A	S DEFINED IN D2 OR D3 ABOVE:		
Full Name of Person Who Meets Criteria D2 or D3		Relationship to Student	Primary Residence with Student (7/2022 to 6/2023)?	This Person is Employed at Least 30 Hrs/Week?	Name of College This Person Will Attend <u>AT LEAST HALF TIME</u> Fall 2022 and/or Spring 2023 (Enter "None" if not applicable)	Type of Degree Program During Fall 2022 and/or Spring 2023 (Associate, Bachelor's,	
			Yes or No	Yes or No	(=mei meile miet applicable)	Master's, PhD, etc.)	
Child Support Rec	eived	in 2020 [Y	ou may be asked f	for proof from tl	ne courts to support your answers i	n this section.]	
					child support payments in 2020 (attac		
HECK HERE IF NO ONE IN Y	OUR HO	OUSEHOLD RECEI	VED CHILD SUPPO	RT IN <u>2020</u> :	(Be prepared to submit agency	or court documents upon requ	
Name of Household Member Who Received Child Support				of Children for W	/hom Child Support was Paid	Amount of Support Received in 2020	
anie of Household Flember	THO RE	cervea erma sapp				2020	
Sign this Workshee	et						
		nformation reported	d is complete and cor	rect. I will report	changes to this information promptly.		
lent signature					 Date		
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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