

Please complete the following worksheet. UMHB will compare this information with **signed** copies of your and your parent(s)' (or spouse's) 2008 federal tax forms or with W-2 forms to the information from your free application for federal student aid (FAFSA). If there are differences between your application, the financial documents you provide, and your FAFSA, our financial aid office will submit the corrections to the Department of Education. This is part of a process called verification. Your information must be verified **before** financial aid can be awarded. The **priority date** for submitting this application plus the relevant tax documents is **March 1, 2009**. The deadline for submitting this application plus the relevant tax documents is May 2010 or, if you are only attending the Fall semester, December 2009. If you fail to meet the deadline, your aid eligibility will not be determined.

## Student Information:

Name \_\_\_\_\_ SSN \_\_\_\_\_ ID \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_ College Major \_\_\_\_\_

## Family Information:

**Dependent students include:** yourself, your parent(s), your parent(s)' dependent children (even if they did not live with your parents)\*, other persons living in your household. *Only include if your parent(s) will provide more than half of their support from July 1, 2009 to June 30, 2010*

**Independent students include:** yourself, your spouse (if applicable), your dependent children (even if they did not live with you)\*\*, other persons living in your household. *Only include if you will provide more than half of their support from July 1, 2009 to June 30, 2010*

Write the names of all household members in the spaces below. Also, include the name of the college for any household member, **excluding parents**, who will attend college at least half-time between July 1, 2009 and June 30, 2010 and who will enroll in a degree, diploma or certificate program. If you need additional space, please attach a separate page.

	Full Name	Age	Relationship	College
1			Self	UMHB
2				
3				
4				
5				
6				

Independent students, please indicate child care costs per month for your dependent children: \_\_\_\_\_

## Income Information:

A **signed** tax return is required if filed. Acceptable tax returns include the IRS form 1040, 1040A, 1040EZ, a tax return from Puerto Rico or a foreign income tax return. If your tax return is not available, request one from your tax preparer or call the IRS at 1-800-829-1040.

**\*\*\*IRS forms 8453 and 8879 are not acceptable forms\*\*\***

**Non-filers only (those who will not file a 2008 tax return,)** please select the appropriate slot(s):

- You** are not required and will not file a 2008 Federal tax return
- Your parents** are not required and will not file a 2008 Federal tax return
- Your spouse** is not required and will not file a 2008 Federal tax return

For every slot selected, please provide the sources of income, if any, received in 2008.

Source of Income	Student (\$)	Parent (\$)	Spouse (\$)
example: McDonalds	\$1,200		

For active duty military, please list rank (e.g., E1, O2): \_\_\_\_\_

List any scholarships (including amounts) expected: \_\_\_\_\_

If receiving Veterans educational benefits, please indicate type and amount: \_\_\_\_\_

\$ \_\_\_\_\_ per month X \_\_\_\_\_ months = \$ \_\_\_\_\_

If tuition reimbursement is available through your employer, please list amount expected: \_\_\_\_\_

## Section A

Student/Spouse		Parents
\$	Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040—line 50 or 1040A—line 31	\$
\$	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 in question 96 (or question 75 for your parents).	\$
\$	Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships	\$
\$	Student grant and scholarship aid reported to the IRS in your (or your parents') adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant or scholarship portions of fellowships and assistantships.	\$
\$	Combat pay or special combat pay. Only enter the amount that was taxable and included in your (your parents) adjusted gross income. Combat pay is reported on the W-2, in box 12, code Q	\$
\$	<b>Student/Spouse Total</b>	\$ <b>Parents Total</b>

## Section B

\$	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H and S	\$
\$	IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans from IRS Form 1040—line 28 + line 32 or 1040A—line 17	\$
\$	Child support received for all children. Don't include foster care or adoption payments.	\$
\$	Tax exempt interest income from IRS Form 1040—line 8b or 1040A—line 8b	\$
\$	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.	\$
\$	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.	\$
\$	<b>Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits)</b>	\$
\$	Veterans noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances	\$
\$	Other untaxed income not reported, such as workers' compensation, disability, etc. Don't include student aid, earned income credit, child 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.	\$
\$	Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form	\$
\$	<b>Student/Spouse Total</b>	\$ <b>Parents Total</b>

### Sign This Worksheet:

By signing this worksheet, I/we certify that all the information reported is complete and true.

**Warning:** If you purposefully give false or misleading information, you may be fined and/or sentenced to jail.

Persons who are more than 30 days delinquent on child support are not eligible for state aid.

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Student

Date

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Parent

Date