

VERIFICATION WORKSHEET

INDEPENDENT

2022-2023 ACADEMIC YEAR

Student's Name _____

UCF ID _____

Spouse Name (if married) _____

Date _____

- Read carefully and complete this verification packet in **black or blue ink**.
- Please refer to your SAR (Student Aid Report) when answering the questions. Any discrepancy may need an explanation and additional documentation.
- Please answer your questions as of the date you signed the FAFSA.
- If a question does not apply to you or your spouse, if married, mark the answer as zero or N/A (not applicable).
- Do not skip any questions. If you leave any section blank, this form may be deemed incomplete and result in the delay of processing aid.

Below is information & instructions for whom to include in the Household, as well as for the "Name of College" field.

A. If the Student Marital Status is:

- **Single**
- **Divorced**
- **Separated** – As of the date the FAFSA was completed, you and your spouse were not living together for an indefinite period of time and the marriage is severed.
- **Widowed**

Include the following in the Household

- Yourself (the student)
- Your children **IF**
 - You will provide more than 50% of the children's support from July 1, 2022 through June 30, 2023 - **OR**
 - The children attending college would be required to provide parent information when completing the FAFSA
- Other people currently living with you for whom **you currently provide and will continue to provide at least 50% of their support** from July 1, 2022 to June 30, 2023.

DO NOT Include the following:

- Foster Children
- Any child you are paying child support for

NOTE: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

B. If the Student Marital Status is:

- **Married**

Include the following in the Household

- Yourself (the student)
- Your spouse
 - You are required to provide your spouse's information in all sections of this form and provide verification of tax information for both you and your spouse.
- Your children **IF**
 - You will provide more than 50% of the children's support from July 1, 2022 through June 30, 2023 - **OR**
 - The children attending college would be required to provide parent information when completing the FAFSA
- Other people currently living with you for whom **you or your spouse currently provide and will continue to provide more than 50% of their support** from July 1, 2022 to June 30, 2023.

DO NOT Include the following:

- Foster Children
- Any child you or your spouse are paying child support for

NOTE: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Instructions for completing "ATTENDING COLLEGE"

On your FAFSA application, you were asked to identify the number of people attending college for the 2022–2023 aid year. The number in college should include any household member who:

- Will be enrolled at least half-time at an eligible postsecondary education institution at any time between July 1, 2022 and June 30, 2023
- Will be enrolled in a degree, diploma, or certificate program

For each person who meets the above criteria, indicate the name of the college. **If the college person is attending UCF – be sure to also list that person's UCF ID.**

Continue to the next page.

Submit complete forms at finaid.ucf.edu/upload. Route this form to Verification/ Taxes

Phone: 407.823.2827 • Fax: 407.823.5241 • Web: finaid.ucf.edu | A Division of Student Success and Well-being

NAME: _____

UCF ID: _____

Section I: Family Information

A. What was your marital status as of the date you first completed the FAFSA?

Single Divorced Married or Remarried Separated Widowed

Section II: Student's Household Size & Number in College

A. You and Your Spouse (If married)

Full Name	Date of Birth	Relationship	If attending college, list: College Name, City, State	UCF ID if attending UCF	Type of Degree Seeking
		Student / Self			
		Spouse			

B. Your Children: List children who will receive more than half of their financial support from you or your spouse, if married, between July 1, 2022 and June 30, 2023, or are required to use your information when completing the FAFSA.

Full Name	Date of Birth mm-dd-yyyy	Relationship	If attending college, at least half-time list: College Name, City, State	UCF ID if child is attending UCF	Type of Degree Seeking
John Example	01/25/1999	son	UCF Orlando, FL	1234567	BA
1.					
2.					
3.					

C. Other Dependents: List other dependents who live with you and your spouse, if married, AND will receive more than half of their financial support from you and your spouse, if married, between July 1, 2022 and June 30, 2023

Full Name	Date of Birth mm-dd-yyyy	Relationship	If attending college, at least half-time list: College Name, City, State	UCF ID if child is attending UCF	Type of Degree Seeking
Jane Example	01/25/1999	niece	n/a	1234567	n/a
1.					
2.					
3.					

Section III: Family 2020 Untaxed Income

	STUDENT	SPOUSE
1. 2020 Untaxed portions of IRA distribution and pensions from IRS form 1040 (lines 4a + 5a) minus (lines 4b + 5b). Total untaxed amount received in 2020	\$ _____	\$ _____
Was the above amount (#1) reinvested in a retirement account?	Yes <input type="radio"/> /No <input type="radio"/>	Yes <input type="radio"/> /No <input type="radio"/>
2. 2020 payments to tax-deferred pension and savings plans (paid directly to or withheld from earnings) including but not limited to amounts reported on your 2020 W-2 in boxes 12a through 12d (Codes D, E, F, G, H, & S).		
Total amount received in 2020:	\$ _____	\$ _____
3. 2020 IRS Deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040 Schedule 1 (total lines 15 + 19)	\$ _____	\$ _____

If you listed an amount for #3 be sure to include a copy of the IRS tax return, Schedule 1, when submitting the 2020 tax return/transcript, except if you used the IRS Data Retrieval tool.

NAME: _____

UCF ID: _____

Section IV: 2020 Excluded Income Information

	STUDENT	SPOUSE
1. 2020 Education credits from IRS Form 1040 Schedule 3 - line 3.	\$ _____	\$ _____

Section V: Asset Information

Complete every question in this section to report the **net value** of assets as of the day you first completed the FAFSA. The net value is defined as the cash out or sale value minus the debt directly related to the asset. Do not leave any answer blank.

	STUDENT	SPOUSE
CASH, SAVINGS, AND CHECKING ACCOUNTS:	\$ _____	\$ _____
REAL ESTATE: (Ex: land, rental property, second and summer homes. DO NOT INCLUDE THE HOME YOU LIVE IN.)	\$ _____	\$ _____
Was rental property sold?.....	<input type="radio"/> Yes / <input type="radio"/> No	When? _____
Address of Rental property → → → → _____		

INVESTMENTS: (Ex: Qualified tuition plans such as Florida Prepaid and 529s, CDs, trusts, mutual funds, stocks, bonds, Education IRAs, S corporations, partnerships, etc.)	\$ _____	\$ _____
---	----------	----------

BUSINESS: (Ex: land, buildings, inventories, equipment, machinery, etc. Note: Do not report small businesses that you or your spouse own and control that has 100 or fewer full time or full time equivalent employees.)	\$ _____	\$ _____
--	----------	----------

FARM INVESTMENT: (Ex: livestock, machinery, land, buildings, equipment, etc.)	\$ _____	\$ _____
Does the family live on a farm? _____ Yes _____ No		

If the tax return indicates the existence of an asset such as interest, dividends, capital gains, rental real estate, partnerships, and S corporations, and you report a \$0 net value, please provide a written explanation below.

Explanation: _____

Continue to the next page.

NAME: _____

UCF ID: _____

Section VI: Verification of 2020 Income

A. Did you (or were you required to) file a 2020 tax return?

Student: Yes No

Spouse (if married): Yes No

- If Yes, you must provide a **signed copy of the 2020 tax return, 2020 tax return transcript** or use the **IRS Retrieval Tool**. To request a copy of the transcript, go to www.irs.gov under "Get your Tax Record" or call 1-800-908-9946.
- If No, each non-filer is required to provide the **IRS Verification of Non-Filing Letter**. To request this letter, go to www.irs.gov and complete the Form 4506-T.

If you attempted to request the IRS Verification of Non Filing Letter and were unable to obtain it, please indicate below:

- Student- I attempted to obtain the Verification of Non-Filing Letter from the IRS or other tax authorities and was unable to obtain the required documentation.
- Spouse- I attempted to obtain the Verification of Non-Filing Letter from the IRS or other tax authorities and was unable to obtain the required documentation.

B. Complete the section below if you/your spouse did not file and are not required to file a 2020 federal tax return.

All Non-Tax Filers must provide a signature on Section VII, page 4.

List all employer(s) and amounts earned in 2020. If self-employed, list "Self-employed" as the employer and report the income earned. If you (and/or your spouse) did not work at all in 2020, write N/A for name of employer(s).

Non-Tax Filer	Income Earned In 2020	Name of Employer	2020 Income Earned	W-2s Attached
Student:	<input type="radio"/> Yes <input type="radio"/> No	1	\$	<input type="checkbox"/>
		2	\$	<input type="checkbox"/>
		3	\$	<input type="checkbox"/>
Spouse:	<input type="radio"/> Yes <input type="radio"/> No	1	\$	<input type="checkbox"/>
		2	\$	<input type="checkbox"/>
		3	\$	<input type="checkbox"/>

A copy of the W-2(s) from each employer must be attached to this form

C. Only complete this section if you or your spouse, if applicable, were not required to file a 2020 tax return.

Annual Amount(s) Received in 2020	Student/Spouse
Financial Aid (grants, scholarship, loans, etc.)	\$
Food Stamps / SNAP	\$
Foreign Income	\$
Alimony	\$
Housing Assistance	\$
Non-Financial Aid Support from Others (i.e. food, housing, insurance, etc.)	\$
VA Benefits: <input type="radio"/> Educational <input type="radio"/> Non - Educational	\$
Worker's Compensation	\$
Other Income	\$

Section VII: Required Signatures

By signing below, you and your spouse, certify that all the information in this packet has been read and completed accurately and truthfully.

Your Signature (Student)

Date Signed

Your Spouse's Signature

Date Signed