2023-2024 ACADEMIC YEAR

VERIFICATION WORKSHEET

INDEPENDENT	
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 <u>and</u> 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, 2023 through June 30, 2024 - 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, 2023 to June 30, 2024.

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, 2023 through June 30, 2024 - 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, 2023 to June 30, 2024.

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 2023–2024 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, 2023 and June 30, 2024
- 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

Section I: Family	[,] Informa	tion			
A. What was your marital state	us as of the date	e you first compl	leted the FAFSA?		
Single Divorced	I	Married or Rema	arried Separ	ated	Widowed
Section II: Stude	nt's Hous	sehold Siz	ze & Number in (College	
A. You and Your Spou	se (If marrie	ed)			
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 ch	ildren who will red	ceive more than ha	If of their financial support from are required to use your inform	you or your spouse, if ma	rried,
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:			h you and your spouse, if marrie Ir spouse, if married, between Ju		
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.					
6 .' 5					
Section III: Famil	y 2021 U	ntaxed In	icome		
1 2021 Untayed partiage of IPA dis	tribution and nor	osions from IDS fo	orm 1040 (lines 4a ± 5a)	STUDENT	SPOUSE
 2021 Untaxed portions of IRA distribution and pensions from IRS form 1040 (lines 4a + 5a) minus (lines 4b + 5b). Total untaxed amount received in 2021 			\$	\$	
Was the above amount (#1) reinvested in a retirement account?			Yes O/No O		
2. 2021 payments to tax-deferred po but not limited to amounts reported or					
Total amount received in 2021:				\$	\$
3. 2021 IRS Deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form1040 Schedule 1 (total lines 16 + 20)				\$	
If you listed an amount for #3 be sure t return/trans		f the IRS tax return, uused the IRS Data		e 2021 tax	

UCF ID:_____

NAME:_____

NAME:	UCF ID:	· · · · · · · · · · · · · · · · · · ·	
Section IV:	2021 Excluded Income Information		
		STUDENT	SPOUSE
1. 2021 Education	credits from IRS Form 1040 Schedule 3 - line 3.	\$	\$
Section V:	Asset Information		
	on in this section to report the <u>net value</u> of assets as of the day you first com		ne net value is
defined as the cash out	or sale value minus the debt directly related to the asset. Do not leave any a		
		STUDENT	SPOUSE
CASH, SAVINGS, AND	CHECKING ACCOUNTS:	\$	\$
	second and summer homes. DO NOT INCLUDE THE HOME YOU LIVE IN.)	\$	\$
	erty sold?	• Yes / • No	When?
Address of Rent	al property→→→→		
		ф	Ф.
(Ex: Qualified tuition plans Education IRAs, S corpora	such as Florida Prepaid and 529s, CDs, trusts, mutual funds, stocks, bonds, tions, partnerships, etc.)	···· \$	Φ
			\$
	ories, equipment, machinery, etc. Note: Do not report small businesses that you or you at has 100 or fewer full time or full time equivalent employees.)	ur "	Ψ
FARM INVESTMENT:		\$	\$
	d, buildings, equipment, etc.)		
Does the family live on a	a farm?YesNo		
	ne existence of an asset such as interest, dividends, capital gains, rental real estate, ations, and you report a \$0 net value, please provide a written explanation below.		
Explanation:		-	
		Continu	ie to the next page.

Section	VI:	Verificati	on of 2021 Income		
↓. Did you (c	or were	you required to) fil	e a 2021 tax return?		
Student:	O Yes	ONo	Spouse (if married): • • • • • • • • • • • • • • • • • • •	ONo	
go to w	ww.IRS.go	ov under "Get your Tax R	he 2021 tax return, 2021 tax return transcript or use the IRS Retriecord" or call 1-800-908-9946. the IRS Verification of Non-Filing Letter. To request this letter, go	·	
If you attem	pted to re	equest the IRS Verification	on of Non Filing Letter and were unable to obtain it, please indica	te below:	
		•	cation of Non-Filing Letter from the IRS or other tax authorities and was u cation of Non-Filing Letter from the IRS or other tax authorities and was u		
. Complete	the secti	ion below if you/you	r spouse did not file and are not required to file a 202	21 federal tax re	eturn.
All Non-Ta	x Filers	must provide a sign	ature on Section VII, page 4.		
			2021 If self-employed, list "Self-employed" as the employer and re 2021, write N/A for name of employer(s).	port the income ea	rned. If you
Non-Tax	Filer	Income Earned In 2021	Name of Employer	2021 Income Earned	W-2s Attached
			1	\$	
S	tudent:	OYes ONo	2	\$	
				\$	
				\$	
Spouse: O'	OYes ONo		.		
			<u> </u>	\$	
			A copy of the W-2(s) from each employer must be attached to		
• Only comp	olete th		your spouse, if applicable, were <u>not</u> required to		
		Annual Am	ount(s) Received in 2021	Student/Sp	ouse
			Financial Aid (grants, scholarship, loans, etc.) Food Stamps / SNAP		
			Foreign Income		
			Alimony		
			Housing Assistance		
	N	Ion-Financial Aid Su	oport from Others (i.e. food, housing, insurance, etc.)	\$	
		V	A Benefits: O Educational O Non - Educational	\$	
			Worker's Compensation		
			Other Income	\$	
action	\/II.	Required	Signatures		
		-	ertify that all the information in this packet has been read and	l completed accur	rately and truthfully.
Your Sig	gnature (S	Student)	Date Signed		
Your Sn	ouse's Si	gnature	 Date Signed		
1001 3p	الد و عدما	D	Date Signed		

UCF ID:_____

NAME: