



2009-2010 VERIFICATION WORKSHEET • FEDERAL STUDENT AID PROGRAMS

Your application for federal student aid has been selected for a quality control process called **verification**. The University of North Alabama, Student Financial Services will compare the information you submit on this form to the information you reported on your financial aid application.

If all information corresponds...
*we will award your financial aid,
if you are otherwise eligible*

If some information does not match...
*we will make corrections for you
and submit those corrections via computer.
Allow 2 extra weeks for corrections.*

Part 1. Student Information

Your Name _____
Your Address _____
street, apt.
_____ city _____ state _____ zip

Your SSN _____
Your Date of Birth _____
Your Phone Number _____ (area code)

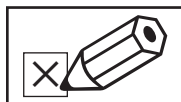
Part II. Family Information

- We will automatically include YOU.
- List your spouse, if you have one.
- List your children, if you (and your spouse, if you have one) will provide more than half of their support from 7-1-2009 through 6-30-2010.
- List other people if they now live with you (and your spouse, if you have one), and you (and your spouse, if you have one) provide more than half of their support and will continue to provide more than half of their support from 7-1-2009 through 6-30-2010.
- If you do not provide college name, that person will not be counted in the number in college.

| household member | full name | age | college <small>must be enrolled at least half-time in degree or certificate program</small> | relationship |
|------------------|-----------|-----|------------------------------------------------------------------------------------------------|--------------|
| spouse | | | | |
| child | | | | |
| child | | | | |
| child | | | | |
| other | | | | |
| other | | | | |
| other | | | | |

If you need more space, attach a separate sheet. Thank you!

Part III. Tax Income



Tax returns include the 2008 IRS Form 1040, 1040A, 1040EZ, Puerto Rico or foreign income tax return. If you do not have a personal copy of your tax return, you may request one from your tax preparer. You may also request a tax return recap, tax return listing, or tax return transcript from the IRS. Do not submit originals. **Copies of tax returns must be signed.**

student spouse, if applicable
 _____ _____

Yes, signed tax return, as listed above, is attached.

OR

_____ _____

NO, 2008 tax return will not be filed.

continued on reverse --- DO NOT STOP HERE --- continued on reverse

Untaxed Income and Exclusions from Income

Please use this form to give the break down of the amount(s) of untaxed income received or exclusions claimed by you and your spouse, if you have one.

Report annual amounts and do not leave amounts blank. If it doesn't apply to you, please enter a zero -0-.

Student / Spouse

2008 Additional Financial Information

| | |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| \$ | 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. |
| \$ | Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships. |
| \$ | Grant and scholarship aid reported to the IRS in the adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships. |
| \$ | Combat pay or special combat pay. Only enter the amount that was taxable and included in the adjusted gross income. Do not enter untaxed combat pay reported on the W-2 (Box 12, Code Q). |

2008 Untaxed Income

| | |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| \$ | 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 forms 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 you 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. |
| \$ | Tax exempt interest income 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. |
| \$ | Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). |
| \$ | Veterans' noneducation benefits such as Disability, Death Pension, or Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances. |
| \$ | Other untaxed income not reported, such as workers's compensation, disability, etc. |
| \$ | Money received or paid on your behalf (e.g., bills), not reported elsewhere on this form. |

Investments and Money on Hand

If questions 43, 44, 45 were not answered on the FAFSA, please complete here:

| | |
|----|------------------------------------------------------------------------------------------------|
| \$ | As of today, what is your total current balance of cash, savings, and checking accounts? |
| \$ | As of today, what is the net worth of your investments, including real estate (not your home)? |
| \$ | As of today, what is the net worth of your current business and/or investment farms? |

I certify that the information on this form is complete and correct. I understand that if I purposely give false or misleading information, I may be fined, sentenced to prison or both.

X

Student Signature

Date