

2010-2011 Independent Verification Form

Office of Student Financial Assistance
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Verification ensures the data reported on your Free Application for Federal Student Aid (FAFSA) corresponds with the data on certain income documents. Please submit this form and the documents listed below as soon as possible. Your financial assistance will be delayed if you do not respond promptly. Please include your (student's) name and social security number at the top/right corner of every page of documentation you submit.

Student Information

_____	_____	_____	_____
Last name	First name	Middle Initial	Social Security Number
_____			_____
Address (local if available)			Phone number
_____	_____	_____	_____
City	State	ZIP code	E-mail address

Required Documentation:

Submit copies of the following documents promptly to the address listed above.

- Signed Independent Verification Form
- Student's **signed** 2009 U.S. Income Tax Return
 - W-2 forms
 - Schedules C and F from your tax return, if applicable
- Spouse's **signed** 2009 U.S. Income Tax Return (if married)
 - W-2 forms
 - Schedules C and F from spouse's tax return, if applicable

Helpful Hints:

- E-file tax returns cannot be accepted.
- Amended returns: include a signed copy of the original return and 1040X.
- If spouse filed a separate return: include a signed copy of both returns.
- Request a copy of your tax return from your preparer or a tax transcript from the IRS at 800-829-1040.
- **If you fax this form, please fax both sides.**

Family Information

List the people in your household, including:

- Yourself
- Your spouse, **if** you are married (even if you were not married in 2009)
- Your children, **if** you provide more than half of their support* from July 1, 2010 through June 30, 2011
- Other people, **if** they now live with you, you provide more than half of their support* and will continue from July 1, 2010 through June 30, 2011

* Support includes money, gifts, loans, housing, food, clothes, car, medical/dental care, etc.

Full name of family member Begin with yourself	Date of Birth ex. 11/17/1986 Do not leave blank.	Relationship to Student self, spouse, daughter, step-daughter, son, step-son, unborn child due during the 2010-11 academic year	Name of College for any family member who will be working toward a degree at least half-time during the 2010-2011 academic year
		Self	Kansas State University

U.S. Income Tax Return File

Place a check mark in the appropriate boxes below for you and/or your spouse. If you **did not** file a tax return, please complete the source of income boxes.

Student **Spouse**

 Yes, I filed a U.S. Income Tax Return which is included with this form.

 No, I did not file a U.S. Income Tax Return and I am not required to file a tax return.
Non-filers only: List all sources of income (i.e. employer, interest income, etc.) and amounts received in 2009. Attach copies of your and/or your spouse's W-2 forms.

Student	Source of Income	Amount	Spouse	Source of Income	Amount

Additional Financial Information

Please review the items below and provide dollar amounts received during 2009. If you did not receive the item, place a "0" on the line.

Student yearly amount		Spouse yearly amount
\$ _____	Child support you received for all children from January 1 through December 31, 2009. Don't include foster care or adoption payments.	\$ _____
\$ _____	Housing, food and other living allowances paid to members of the military (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing. Be sure to include the value of BAS and COLA. Also submit the last LES received in 2009.	\$ _____
\$ _____	Housing and living allowances paid to members of the clergy and others (including cash payments and cash values of benefits).	\$ _____
\$ _____	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 elsewhere, such as workers' compensation, disability, etc. Don't include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, on-base military housing or a military housing allowance, 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.	\$ _____
\$ _____	Child support paid from January 1 through December 31, 2009 because of divorce or separation or as a result of a legal requirement. Please list the names of the children that you paid child support for. _____	\$ _____
\$ _____	Earnings from work under a cooperative education program offered by a college.	\$ _____
\$ _____	Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$ _____

Certification Statement

By signing this verification form, I certify that all the information reported is complete and accurate.

Student (signature required)

Date

Spouse (signature optional)

Date