



Financial Aid Verification Worksheet 2009-2010

Hamline University – Law and Grad

Name of Student (Please Print)		
Last	First	MI
Date	Hamline ID or SSN	

MAIL OR FAX COMPLETED FORM TO:

Hamline University
 Office of Financial Aid
 1536 Hewitt Avenue
 St. Paul, MN 55104
 Voice: 651.523.3000
 Fax: 651.523.2585

You have been selected by the federal government for a process called verification. You must complete both sides of this worksheet and return it to the Office of Financial Aid. You must also include a copy of your and (if applicable) your spouse's 2008 signed federal income tax forms to enable you to receive financial aid for the 2009-10 academic year.

DO NOT LEAVE A LINE BLANK. IF ANSWER IS ZERO OR DOES NOT APPLY, ENTER "0"

Section 1: Tax Return Filing Status	STUDENT (& Spouse)
Did you or will you file a 2008 federal tax return? (If yes, send signed photocopies of your 2008 federal tax return (with schedules) to the Hamline Financial Aid Office with this document.)	Yes___ No___
If you did NOT file a tax return, list the sources and amounts of 2008 income: Source(s):_____	\$

Section 2: Untaxed Income - Calendar Year 2008	STUDENT (& Spouse)
Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including amounts reported on the W-2 Form in Box 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-total of lines 28 and 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/pensions from IRS Form 1040-lines (15a minus 15b) + (16a minus 16b) and/or 1040A-lines (11a minus 11b) + (12a minus 12b). Excluding 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 & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances	\$
Any other untaxed income or benefits not reported elsewhere, 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 money paid on your behalf (e.g., bills), not reported elsewhere on this form	\$

Section 3: Income Adjustments - Calendar Year 2008	STUDENT (& Spouse)
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. Do not include support for children in your household, as reported in question 96.	\$
Taxable earnings from Federal Work-Study or other need-based work portions of fellowships & assistantships.	\$
Student grant, scholarship, and fellowship/assistantship aid (in excess of tuition & fees), including AmeriCorps awards that was reported to the IRS in your adjusted gross income.	\$
Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Combat pay is reported on the W-2 in Box 12, Code Q.	\$

Section 4: FAMILY INFORMATION

Please include in the spaces below the same people that you listed on the FAFSA form, item #96 (spouse, son, daughter, etc.)

Name	Age	Relationship to Student	School this person will attend in 2009-2010	Full-Time or Part-Time	Year of school during 2009-2010

Section 5: CERTIFICATION

I certify that the information reported on this form and/or attached to it, is correct to the best of my knowledge and belief. I authorize Hamline University to correct my FAFSA data based on this information. I authorize the release of my financial aid application information and transcripts to scholarship and/or financial aid committees considering my eligibility. My/our signature(s) below indicate that all the information reported is true and correct.

Student Signature

Date

Spouse Signature (if applicable)

Date

Please Note: Spouse's signature is required if their financial information was used to calculate the student's financial aid.

REMINDER: YOU MUST SUBMIT SPOUSE (if applicable) AND STUDENT 2008 SIGNED FEDERAL INCOME TAX FORMS WITH THIS DOCUMENT!