

2024-2025 UNTAXED INCOME VERIFICATION FORM		
Student Name: Student ID#:		
Email: Home/Cell Phone:		
Your 2024-2025 Free Application for Federal Student Aid (FAFSA) was selected for review via a process process is mandated by the US Department of Education, requiring schools to verify the data provided o accuracy. We must ask you to confirm the information you reported on your FAFSA. To verify that you p we will compare your FAFSA with the information on this worksheet and with any other required docur differences, your FAFSA information may need to be corrected. You must complete and sign this worksh Financial Aid Office.	n the FAFSA to rovided correct nent(s). If there	ensure its information, are
All forms & documentations should be submitted to the Financial Aid Office at Catawba College, 2300 V 28144. To securely upload documents, log into My Catawba Portal, and use the Financial Aid Docume Document Upload can be found on the left-hand side of the screen under Systems . Due to Fede identifiable (Tax Return Transcripts and W2 information) can be scanned to email. NOTE: Supporting documentation is required.	ent Upload. Th	e Financial Aid
Please complete the section below. For dependent students, please complete both sections for student and parent whose information is on the FAF For independent students, please complete the student/spouse section. Report the TOTAL amounts received in 2022 from January 1, 2022, through December 31, 2022.	'SA.	
	STUDENT/ Spouse	PARENT(s)
Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or basic military allowance for housing.	\$	\$
Veteran's non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$	\$
Other untaxed income not reported above, 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, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$	\$
Money you received, or that was paid on your behalf by someone else (e.g., bills), not reported elsewhere.	\$	\$
Combat pay or special combat pay. Only enter the amount that was taxable and included in you or your parent's adjusted gross income. Don't include untaxed combat pay.	\$	\$
You or your Parents' taxable college grant and scholarship aid reported to the IRS as income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$	\$
Total	\$	\$
Signatures Each person signing below certifies that all of the information reported is complete and correct. STUDENT SIGNATURE:		

WARNING: If you purposely give false or misleading information in an attempt to obtain federal financial aid, you may be fined up to \$20,000 and/or incarcerated.

DATE: ____

PARENT/SPOUSE SIGNATURE: _____

(If applicable)