

Office of Financial Aid

800 W Campbell Rd ROC22 Richardson, TX 75080 972-883-2941 ph | 972-883-6803 fax financial-aid@utdallas.edu

2022-2023 VERIFICATION WORKSHEET

Student Additional Financial Information

Use your (and your spouse's) additional financial information for 2020 to complete the following worksheet. If any item does not apply, please enter "N/A" for Not Applicable.

Once we have received all requested documents on your To Do List, please allow our office up to 3 weeks to review and process the documents submitted.

Student Information						
Name (Last, First, Middle Initia	1)					
UTD ID						
Child Support Paid List the amount of child support already included in your house	t you (and your spouse) paid in 2 hold size.	020. Do	not include child s	upport paid	for the children	
Name of Person Who Paid Support	Name of Person Who Received Support Payments	For V	me of Child Vhom Support was Paid	Age of Child	Total Amount Paid in 2020	
Taxable Earnings from Need-Based Employment Programs List your (and your spouse's) 2020 taxable earnings from Federal Work-Study and/or other need-based employment programs. Also include need-based employment portions of fellowships and assistantships.						
Source of Income			Total Amount Received in 2020			
Taxable Grant and Scholarship Aid List the amount of taxable college grant and scholarship aid reported on your (and your spouse's) 2020 tax return. This amount can be found on the 2020 tax return, listed with the notation "SCH" beside line 1 of the 1040.						
Type of Aid			Total Amount Reported as "SCH" on the 2020 tax return			



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UTD ID: STUDENT'S NAME:	STUDENT'S NAME:				
Combat Pay List the amount of combat pay or special combat pay reported by you the adjusted gross income. Don't include untaxed combat pay.	ม (and your spouse) on your 2020 tax return as part of				
Source of Income	Total Amount Received in 2020				
Cooperative Education Earnings List the amount of your (and your spouse's) 2020 earnings from work college.	under a cooperative education program offered by a				
Source of Income	Total Amount Received in 2020				
Signature and Certification					
Each person signing this worksheet certifies that all of the infor	rmation provided above is complete and correct.				
Student Signature					
Spouse Signature	ature Date				
Please submit your completed worksheet with handwritten (not	tuned) signatures to the Financial Aid Unlander tool				