

Mailing Address

City

University of the Virgin Islands - Office of Financial Aid 2023-2024 AGGREGATE Verification Worksheet

V5 Dependent

What you should do

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. Federal law states that before any Federal Student aid can be awarded, you and your parent(s) must provide copies of 2021 Tax Return transcript(s) or a signed copy of the 2021 tax return, applicable schedules and W-2 form(s) or Verification of Non-Filing Letter and other required documents to your school. The documents will be used to verify that the information reported on your FAFSA is correct. Any discrepancies will result in revision of your FAFSA. You must complete and sign the worksheet, attach all required documents, and submit to the University of the Virgin Islands Financial Aid Office. If you have questions about verification, contact us at financialaidstx@uvi.edu or 340-692-4193, St. Croix or at financialaidstt@uvi.edu 340-693-1090. St. Thomas.

- Talk to your financial aid administrator if you have any questions about completing this worksheet.
- 2. Complete and sign the worksheet you and at least one parent.
- Submit the completed worksheet, <u>2021 Tax Return</u> <u>transcript(s) or a signed copy of the 2021 tax return,</u> <u>applicable schedules</u>, W-2 form(s) and any other required documents your school requests to your financial aid administrator.
- Your financial aid administrator will compare information on this worksheet and any supporting documents with the information you submitted on your FAFSA. You or your school may need to make corrections electronically or by using your Student Aid Report (SAR).

and W-2 form(s) * PARENTAL Non-tax file	ers must submit a Verification of No	n-Filing Letter	from the IRS	
A. Student's Information				
Last Name	First Name	M.I.	Last 4 Digits of SSN	ID Number

Date of Birth

Email Address

Alternate or Cell Phone Number

Zip Code

Tax filers must submit the 2021 Tax Return transcript(s) or a signed copy of the 2021 tax return, applicable schedules

B. Dependent Student's Family Information

Home Phone Number (include area code)

List below the people in your parents' household. Include:

• Yourself and your parents (including a step-parent) even if you don't live with your parents.

State

- Your parents' other children if your parents will provide more than half of their support from July 1, 2023 through June 30, 2024, or if the other children would be required to provide parental information if they were completing a FAFSA for 2023-2024. Include children who meet either of these standards, even if they do not live with your parents.
- Other people if they now live with your parents and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2023 through June 30, 2024.

Include the name of the college for any household member, excluding your parents, who will be enrolled, <u>at least half time (six credit hours)</u>, which is in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2023 and June 30, 2024. *If more space is needed, attach a separate page with the student's name and UVI student ID number at the top.*

Full Name	Age	Relationship	College/University	Will be Enrolled at least half time (6 or more credits)
Missy Jones (example)	18	Sister	Central University	Yes
		Self	University of the Virgin Islands	

Dependent Student 2021 IRS Tax Retui	n Transcript(s) or a sig		GREGATE Verificati	ırn and applic <u>able sch</u>
2021 IRS Tax Return Transcript(s)				
	-			
o request an official 2021 Tax Return Transc		ata diamatakan adibu tha		action due the Domestic of the
For U. S. Virgin Islanders Tax Filers: For Revenue (BIR) offices. You may also control John – (340) 777-1446.				
For U.S Tax Filers: Complete Form 45067	Γ online at <u>www.irs.gov</u> or o	call 1-800-908-9946.		
Not employed in 2021.				
Check here if you will be attaching your W	-2 Form(s) and 2021 IRS	Income Tax Return or	Tax Return Tran	script.
If you did not file and are not required to fi IRS W-2 Form.	le a 2021 Federal income	tax return, list below yo	our employer (s) , e	even if you were not iss u
Employer's Name or Source of Income (A		IRS W-2 Attached Yes/No	20	21 Income
. 3, ,	•		\$	
			\$	
			\$	
Funds received for child support and other	untaxed income (See ques	stion 44 on the FAFSA.)		
Sources of Untaxed Income	2021 Amount	Sources of Unta		2021 Amount
a. Child support received	\$	e. Workman's Compens f. Veterans non-education		\$
b. Tax exempt (IRS form 1040 – Line 2a) c. Untaxed IRA distributions (IRS form 1040-line	\$	g. Payments to pension (\		\$
4a minus 4b)	\$	through 12d, codes D, E, F,		\$
d. Untaxed IRA pensions & annuities (IRS form 1040-line 5a minus 5b)	\$			
2021 IRS Tax Return Transcript(s) or request an official 2021 Tax Return Transcript (s) For U. S. Virgin Islanders Tax Filers: of Internal Revenue (BIR) offices. You may 1040; St. John – (340) 777-1446.	cript or Verification of No rm 4506T must be comple also contact the VI BIR of	n-Filing Letter ted and signed by the ta fices for assistance: St.	ax payer or non-fi	ler and submitted to the B
For U.S Tax Filers: Complete Form 4506				
Check here if vour parent(s) will be attact	ning the W-2 Form(s) and			•
- ····································		Filing Letter because the	ney will not file or v	were not required to file; o
	THOM WORK IN 2021.			
Check here if your parent(s) will be attach not employed and had no income earned	required to file a 2021 Fedo our parent(s) were not en		ome earned from	n work in 2021, list the sou
Check here if your parent(s) will be attach not employed and had no income earned (a) If your parent(s) did not file and are not income earned were not issued an IRS W-2 Form. (b) If your parent issued an IRS W-2 Form.	required to file a 2021 Fedeour parent(s) were not en 21.			n work in 2021, list the sou
Check here if your parent(s) will be attach not employed and had no income earned (a) If your parent(s) did not file and are not were not issued an IRS W-2 Form. (b) If y any income your household received in 202 Employer's Name or Source of Income (March 1988)	required to file a 2021 Fedeour parent(s) were not en 21.	nployed and had no inc	\$	
Check here if your parent(s) will be attach not employed and had no income earned (a) If your parent(s) did not file and are not were not issued an IRS W-2 Form. (b) If y any income your household received in 202 Employer's Name or Source of Income (March 1988)	required to file a 2021 Fedeour parent(s) were not en 21.	nployed and had no inc	20.	

Sources of Untaxed Income	2021 Amount Sources of Untaxed Income		2021 Amount
a. Child support received	\$	e. Workman's Compensation	\$
b. Tax exempt (IRS form 1040 – Line 2a)	\$	f. Veterans non-education benefits	\$
c. Untaxed IRA distributions (IRS form 1040-line	¢	g. Payments to pension (W-2 boxes 12a	¢
4a minus 4b)	Ψ	through 12d, codes D, E, F, G, H & S)	Ф
d. Untaxed IRA pensions & annuities (IRS form	¢		
1040-line 5a minus 5h)	Ф		

Student's Name	ID#	23-24 AGGREGATE Verif	ication Worksheet V5-Dependent pg. 3
E. Identity and Statement of Educ	ational Purpose (See Enclosed \$	Supplement Form) Student's In	formation
\Box If you are unable to submit this form	n person, you <u>must</u> complete Section n in person, you <u>must</u> complete Sectio ment to your school's Financial Aid O	on H - Part 2 in the presence of a No	•
Each person signing this worksheet certifies			false or misleading information on
complete and correct. The student and one	parent must sign this worksheet.	this worksheet, you may be fit	ned, be sentenced to jail, or both.
Student's Signature	Date	Parent's Signature	Date



Section H - Part 1: Identity and Statement of Educational Purpose

<u>www.uvi.edu</u>				
Last Name	First Name	M.I.	Social Security Num	lI nber ID Number
f you are able to submit t Financial Aid Officer at yo		<u>must</u> complete Sec	tion H - Part 1 in	the presence of your
Γhe student must appear in		University of the lame of Postsecondary E		to verify
to, a driver's license , other	state-issued ID, or passpo	ort. The institution v	vill maintain a cop	(ID), such as, but not limited by of the student's photo ID on authorized to collect the
n addition, the student mu	st sign, in the presence of t	he institutional offici	al, the following:	
	Statement of	<u>Educational</u>	<u>Purpose</u>	
I certify that I	(Dint Challent's Name)	am th	ne individual signin	g this
	(Print Student's Name)			
Statement of Educational Po	urpose and that the federal	student financial as	sistance I may rece	eive will only be used for
educational purposes and to	o pay the cost of attending		the Virgin Islands	
(Student's	Signature)	(Student's II	O Number)	(Date)
	C	Office Use Only		
Financial Aid O	fficer's Name	Financial Aid Officer	's Signature	 Date



Section H - Part 2: Identity and Statement of Educational Purpose

Last Name	First Name	M.i.	Social Security Number	II ID Number
	nit this form in person, you <u>n</u> rized documents to your sch			presence of a No
	appear in person at			to
	(Name of Postsecond	dary Educational Institution)	
(a) A copy of a valid, i	ne student must provide: not expired, government-issue below, such as, but not limited	•		•
(b) The original notari	zed Statement of Educational I	Purpose provided	l below.	
	Statement of E	<u>ducationa</u>	<u>l Purpose</u>	
L certify that I			am the individual signin	ng this
recitify that r	(Print Student's Name)		ann the mannadar signi	18 (1113
atement of Educational I	Purpose and that the federal st	udent financial a	ssistance I may receive v	will only be used fo
	•		•	•
ducational purposes and	to pay the cost of attending _		of the Virgin Islands	
		(Name of Postsec	condary Educational Institution	on)
				<u>.</u> .
(St	udent's Signature)	(Student's	ID Number)	(Date)
<u>No</u>	tary's Certificate	of Acknov	<u>wledgement</u>	
State of	, City/Co	unty of		
State 01		direy or		
On			, personally appeare	d,
(Date)		(Notary's name)		
(Printed name of signer)	, and p	rovided to me on	basis of satisfactory evi	dence of
(Fillited hame of signer)				
Identification	upe of government-issued photo ID p	to l	pe the above-named per	son
. ,		rovided)		
who signed the foregoi	ng statement.			
WITNESS my hand ar	nd official seal			
(seal)				
			(Notary sign	ature)
My commission expir	es on			
	(Date)			