P.O. Box 3300 = Somerville, NJ 08876-1265 = www.raritanval.edu



## 2022-23 Additional Verification Worksheet - 400 & 401

The U.S. Department of Education has implemented additional income verification for the 2022-2023 aid year. This is meant to resolve discrepancies in information reported on your Free Application for Federal Student Aid (FAFSA). Federal Student Aid (FSA) regulations require the RVCC Office of Financial Aid to correct the inconsistent information before it can offer a financial aid package to your account.

Student's Last Name	First Name	M.I.	Social Security Number
	G#		

## Section 1 — Untaxed Income Directions:

Indicate whether you and your parent/spouse received the following untaxed forms of income. If you did receive one of the forms of untaxed income, check "yes" and then report the total amount for 2020.

,		
2020 Untaxed Income Resources	Student	Parent/Spouse
Payments to tax-deferred pensions or savings plans	Yes [ ] No [ ]	Yes [ ] No [ ]
<ul> <li>WHAT TO REPORT: Amount on W-2s in boxes 12a-12d, codes D, E, F, G, H, and S.</li> </ul>		
<ul> <li>SUBMIT ALL 2020 W-2s along with this worksheet.</li> </ul>	Amount \$	Amount \$
	Attach 2020 W-2s	Attach 2020 W-2s
Total child support received for any of your children		
<ul> <li>WHAT TO REPORT: Total amount disbursed on 2020 statement from</li> </ul>	Yes [ ] No [ ]	Yes [ ] No [ ]
njchildsupport.org.		
<ul> <li>DO NOT REPORT: Foster care or adoption payments.</li> </ul>	Amount \$	Amount \$
Housing, food and/or other living allowances		
<ul> <li>WHAT TO REPORT: Allowances paid to military, clergy or other applicable recipients.</li> </ul>	Yes [ ] No [ ]	Yes [ ] No [ ]
<ul> <li>DO NOT REPORT: Value of on-base military housing or value of basic military housing</li> </ul>		
allowances.	Amount \$	Amount \$
Veterans non-educational benefits		
<ul> <li>WHAT TO REPORT: Disability, Death Pension or Dependency &amp; Indemnity</li> </ul>	Yes [ ] No [ ]	Yes [ ] No [ ]
Compensation (DI) and/or the VA Educational Work-Study allowances.		
DO NOT REPORT: GI Bill, Dependents Education Assistance Program, VA Vocational	Amount \$	Amount \$
Rehabilitation Program or VEAP benefits.		
Other untaxed income		
<ul> <li>WHAT TO REPORT: Workers' compensation, disability and/or untaxed portions of</li> </ul>		
health savings accounts from IRS Form 1040—line 25.	Yes [ ] No [ ]	Yes [ ] No [ ]
<ul> <li>DO NOT REPORT: Welfare payments, untaxed Social Security benefits, Supplemental</li> </ul>		
Security Income, Workforce Investment Act educational benefits, extended foster care	Amount \$	Amount \$
benefits, student aid, earned income credit, additional child tax credit, on-base military		
housing or a military housing allowance, combat pay, 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.		
<ul> <li>WHAT TO REPORT: Money received from a parent/other person whose financial</li> </ul>	Yes [ ] No [ ]	Yes [ ] No [ ]
information is not reported on this form and that is not part of a legal support		
agreement	Amount S	Amount S

## Section 2 — Additional Financial Information

Directions: Indicate whether you and your parent/spouse received the following forms of income. If you did receive one of the forms of additional income, check "yes" and then report the annual amount for 2020.

	2020 Additional Financial Info	rmation	Student	Parent/Spouse
Total child support you paid b	ecause of divorce/separation or	as a result of legal requirements	Yes [ ] No [ ]	Yes [ ] No [ ]
	-	statement from njchildsupport.org.		
DO NOT REPORT: Su	ipport paid for children living in yo	our household.	Amount	Amount
			\$	\$
Taxable earnings from need-b	ased employment programs, suc	ch as Federal Work Study	Yes [ ] No [ ]	Yes [ ] No [ ]
_		ork-Study and need-based employment		
	ips and assistantships.	, , ,	Amount	Amount
DO NOT REPORT: Gr	rant and scholarship award inform	nation	\$	\$
Tavable college grant and scho	olarship aid reported to IRS as inc	come	Yes [ ] No [ ]	Yes [ ] No [ ]
		ng allowances and interest accrual	163[ ] 140 [ ]	163[ ] 140 [ ]
	s grant and scholarship portions of		Amount	Amount
		vards such as federal Pell, FSEOG, Direct	\$	\$
	_	TAG, EOF, STARS or CLASS Loans.	T	*
, and the second	,			
Combat or special combat pay			Yes [ ] No [ ]	Yes [ ] No [ ]
	Taxable amount that is included ir	1 your adjusted gross income.		
DO NOT REPORT: Ur	ntaxed combat pay.		Amount	Amount
		<u> </u>	\$	\$
	ooperative education program of		Yes [ ] No [ ]	Yes [ ] No [ ]
	Earnings from formal co-op placer		A	A
DO NOT REPORT: W	ages from employers that are not	a part of the co-op program	Amount \$	Amount \$
			J	۶
Disclaimer: The Office of Fina	ancial Aid reserves the right to	ask for official documentation (i.e. c	court orders, benef	its statements) to
resolve any discrepancies in	addition to this form.			
Note: Making changes to you	ur FAFCA to clarify inconsistant	tinformation may recult in the LLC. F	Sanartmant of Educ	nation coloating va
		t information may result in the U.S. D	repartment of Educ	Lation selecting yo
for verification. The RVCC Of	fice of Financial Aid will reques	st additional paperwork as a result.		
Each person signing below ce	ertifies that all of the informat	ion reported is complete and correct	t.	
Independent Students: The	student only must sign and da	te.		
=	·	nformation was reported on the FAF	SA must sign and d	lato
Dependent students. The str	adent and one parent whose i	mormation was reported on the PAF	on illust sigil allu u	iate.
Student's Signature	Date	Parent Signature	Dat	<del>_</del> e