



UCLA, Financial Aid Office  
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 Los Angeles, CA 90095-1435  
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## 2009-2010 INDEPENDENT VERIFICATION FORM

Name: Last \_\_\_\_\_ First \_\_\_\_\_ UID# \_\_\_\_\_

Your file has been selected for verification of the data provided on your Free Application for Federal Student Aid (FAFSA). We cannot evaluate your eligibility for financial aid until you submit all required verification documents. Delays in completion and submittal of this form may result in limited funding for 2009-10.

*\*\*\* If needed, we reserve the right to request additional documents that are not specified on this form. \*\*\**

### STUDENT/SPOUSE TAX FORM AND INCOME INFORMATION (Check One)

- I have attached a complete and **signed** copy of my (and my spouse's) 2008 tax return (IRS Form 1040/1040A/1040EZ), **including all schedules, statements and W2 forms.**
- I will not file a 2008 tax return (IRS Form 1040/1040A/1040EZ). List any income you (and your spouse) received in 2008. Please attach verification of income received, i.e., W2's, 1099-misc, SSI statements, etc. If no income was received, put \$0. \$ \_\_\_\_\_

### HOUSEHOLD INFORMATION

Please list your dependents for the 2009-2010 academic year below. Include yourself, your spouse, and your dependents if applicable. Include other people only if they will live with and will receive at least half of their support from you during the entire period from 7/1/09 to 6/30/10.

Full Name	Age (as of 12/31/09)	Relationship To Student	Name of College (Attending at Least Half-Time During 09-10)	Graduate Student Y/N
		Self	UCLA	

**STUDENT/SPOUSES' STATEMENT OF EXPENSES AND RESOURCES**

Please itemize both your monthly and yearly expenses and list all sources of income from January 1, 2008 to December 31, 2008. (Do not include expenses that relate to family businesses, rental property, or college costs for you or your children.).

TYPE OF EXPENSE	PER MONTH	PER YEAR
Rent or mortgage payment		
Utilities (gas, electricity, water, phone)		
Insurance (include home, apartment, auto)		
Food		
Transportation (car payments, gas, repairs, public transit)		
Medical/Dental		
Clothing		
Recreation		
Other (specify):		
Other (specify):		
TOTAL EXPENSES	\$	\$
RESOURCES	PER MONTH	PER YEAR
Income from employment - Student		
Income from employment - Spouse		
Interest and dividend income		
Unemployment benefits		
Worker's Compensation and/or Disability benefits		
Child support		
Living allowances paid to military, clergy and others		
Veteran non-educational benefits		
Social Security benefits		
Temporary Assistance for Needy Families (TANF)		
Food Stamps/WIC/Subsidized Housing		
Foreign income		
Other (specify):		
TOTAL INCOME	\$	\$

**STUDENT ASSET VERIFICATION**

Information below is required, if your and/or your spouse's 2008 tax returns reflect values in any of the lines/schedules specified below. **Report all values as of the date the FAFSA was completed.** Attach additional pages if necessary.

**SCHEDULE B/ 1040 or SCHEDULE 1/1040A: Dividend Income (Line 9a & b)**

If there is dividend income reported on Part II of your Schedule B or Schedule 1, then list the name and total asset value of each account, below:

Name of Account _____	Total Asset Value \$ _____
Name of Account _____	Total Asset Value \$ _____
Name of Account _____	Total Asset Value \$ _____

**SCHEDULE D: Capital Gain Income/Loss (Line 13 IRS Form 1040)**

**Part II of Schedule D** - If there is an amount listed in box 10d reflecting proceeds from the sale of a long-term investment, we require that you and/or your spouse provide a statement below indicating what was done with the proceeds from the sale (i.e. re-invested, transferred to savings account, or used to pay 2008 expenses).

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**SCHEDULE E: Real Estate Investment Property (Line 17 IRS Form 1040)**

Investment real estate value includes market value of land, buildings, machinery, equipment, inventory, etc. Real estate debts are only debts that are related to the investment.

**Part I Real Estate (exclude primary residence)** - List properties/royalties from Schedule E below.

Address: \_\_\_\_\_  
 Current market value \$ \_\_\_\_\_ Current mortgage balance \$ \_\_\_\_\_

Address: \_\_\_\_\_  
 Current market value \$ \_\_\_\_\_ Current mortgage balance \$ \_\_\_\_\_

**CERTIFICATION STATEMENT**

I certify that all the information reported on this form is complete and accurate. I understand that I may be required to provide additional documentation. Purposely providing false or misleading information on this worksheet, may result in an investigation by the Inspector General for Student Aid Fraud.

_____ Student Signature	_____ Date	_____ Spouse Signature	_____ Date
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