



2009-10 Student Financial Information Verification

STUDENT FINANCIAL ASSISTANCE

Tempe campus

PO Box 870412
Tempe, AZ 85287-0412

Student Services Building,
Second Floor

Phone (480) 965-3355
Fax (480) 965-9484

financialaid@asu.edu

Downtown Phoenix campus

411 N. Central Ave., Suite 166
Phoenix, AZ 85004-2120

University Center Building,
Suite 166

Phone (602) 496-3462
Fax (602) 496-0376

financialaid@asu.edu

Polytechnic campus

7107 E. Tiburon, #3
Mesa, AZ 85212-0180

Student Affairs Complex, Quad 3

Phone (480) 727-1041
Fax (480) 727-1630

financialaid.poly@asu.edu

West campus

PO Box 37100
Phoenix, AZ 85069-7100

University Center Building,
Room 120

Phone (602) 543-8178
Fax (602) 543-8108

financialaid.west@asu.edu

SECTION A: STUDENT INFORMATION (PLEASE PRINT)

FULL NAME (LAST, FIRST MI.)	10-DIGIT ASU ID	9-DIGIT CAMPUS ID
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SECTION B: ADDITIONAL FINANCIAL INFORMATION FOR JANUARY 2008 – DECEMBER 2008

Do not leave any amount blank; write "0" if the item does not apply; if any items are missing or left blank, this form will be return to you unprocessed. Include spouse's information if you were married when you filed the FAFSA. If necessary, Student Financial Assistance may require additional information or documentation to complete your file after submitting this form.

INCOME TYPE	STUDENT	SPOUSE
a. Education credits (Hope and Lifetime tax credits) from IRS Form 1040—line 50 or 1040A—line 31.	\$	\$
b. Child support paid because of divorce or separation or as a result of a legal requirement. Don't include support for children in your household, as reported on the FAFSA—Question 75 or Question 96.	\$	\$
c. Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$	\$
d. Student grant and scholarship aid reported to the IRS in your adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$	\$
e. Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Do not enter combat pay reported on the W-2 (Box 12, Code Q).	\$	\$
Total	\$	\$

SECTION C: CERTIFICATION STATEMENT & SIGNATURES

I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. I understand that purposely providing false or misleading information on this form may result in reduction or repayment of aid, fines and/or imprisonment in this and/or future years.

STUDENT SIGNATURE	DATE
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