

Office of Financial Aid, Veteran Services and Student Employment

2500 Carlyle Avenue • Belleville, IL 62221-5899

866-942-SWIC (7942), ext. 5288 • 618-235-2700, ext. 5288 • Fax 618-235-3827

STUDENT INCOME & BENEFIT VERIFICATION FORM

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, SWIC is required to compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. **You must complete and sign this form, attach any required documents, and submit the form and other required documents to the Financial Aid Office at SWIC. We may ask for additional information.** If you have questions about verification, contact our office as soon as possible so that your financial aid will not be delayed.

PLEASE NOTE: If we have reason to believe any information is inaccurate, we may request additional documentation.

A. STUDENT INFORMATION

Student Last Name

First Name

M.I.

SWIC Student ID Number

B. STUDENT'S DATA REQUIRED, (PLUS SPOUSE'S, IF MARRIED AND NOT SEPARATED)

Full Name	Date of Birth	Relationship	SSN
		SELF	
		(SPOUSE)	

C. BENEFITS RECEIVED FOR HOUSEHOLD

Complete this section to indicate benefits/assistance received by student, spouse, or other members of your household.

PLEASE NOTE: Members of your household means those people who qualify to be included in your household size following the 2023-2024 FAFSA instructions, not necessarily everyone who lives in your house.

Benefit	Received 2021 and/or 2022?	
WIC	Yes	No
Free or Reduced Price Lunch	Yes	No
TANF	Yes	No
SSI (Supplemental Security Income)	Yes	No
Medicaid	Yes	No
SNAP/Food Stamps	Yes	No

Other Assistance	Received 2021?	
Section 8 Housing, HUD, or Income Sensitive Rent	Yes	No
LIHEAP, Circuit Breaker, or other Energy Assistance Program	Yes	No
Veteran Education Benefits	Yes	No
Social Security Benefits (<u>NOT</u> SSI)	Yes	No
Financial Aid/Scholarships	Yes	No

Student's Name: _____ SWIC ID Number: _____

D. STUDENT/SPOUSE INCOME EARNED FROM WORKING

Did you/your spouse file 2021 federal tax return(s)?

☐ **Yes** If not already submitted to us, and you did not utilize the data retrieval tool on the 2023-2024 FAFSA, **submit 2021 federal tax return documentation for each tax filer**--a copy of your/your spouse's 2021 IRS tax return transcript(s) or signed federal tax return(s) (IRS 1040, including Schedules 1, 2, and 3, if filed). See <https://www.swic.edu/students/services/financial-aid/irs-tax-return-transcript-request> for how to request the tax return transcript. Copies of W-2s and 1099s are not required for tax filers at this time unless specifically requested otherwise.

☐ **No** 1) If you have not already done so, **submit to our office a 2021 IRS Verification of Non-filing letter for each non-filer**. See <https://www.swic.edu/students/services/financial-aid/irs-verification-of-non-filing-letter/> for how to request the non-filing letter. (If you have attempted to obtain this document by all methods and were unable to, contact our office for assistance.)

2) **Enter all 2021 earned income information** for you/your spouse, below.

3) **Submit copies of all 2021 W-2s received, as well as any 1099 forms, if applicable.**

NON-FILERS: Fill in columns below for ALL income you/your spouse earned from working in 2021. If one or both of you had 0 earned income, enter the person's name, along with N/A.

Employee's Name	Employer's Name	Annual Amount Earned in 2021	IRS W-2 Provided? Yes or No*
		\$	
		\$	
		\$	
		\$	

*If W-2 was not received, explain why: _____

E. STUDENT/SPOUSE UNTAXED INCOME

Report **annual** amounts for 2021. **Enter "0" if not applicable.** Do **not** include below any of the benefits/assistance listed in Section C on page 1.

Untaxed Income Type	Annual Amount in 2021
Unemployment compensation received, if not reported as income on 2021 federal tax return.	\$
Child support received for children in household. (Don't include foster care or adoption payments.)	\$
Workers' compensation.	\$
Disability payments (OTHER THAN SSI or SSDI Social Security disability benefits).	\$
Alimony received, if not reported as income on 2021 federal tax return.	\$
Veterans noneducation benefits (such as Disability, Death Pension, Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances).	\$
Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). (Don't include military housing.)	\$
Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D,E,F,G, H and S. Don't include amounts reported in code DD.	\$
Other untaxed income not reported above or on 2021 federal tax return. (See 2023-2024 FAFSA question 41h.) **ALSO SPECIFY SOURCE(S) OF THIS OTHER UNTAXED INCOME:	**\$

F. INCARCERATION (DOCUMENTATION MAY BE REQUESTED)

In 2021, were you or your spouse incarcerated?

☐ **No**

☐ **Yes (Name)** _____ was incarcerated from ____/____/2021 to ____/____/2021.

Student's Name: _____ SWIC ID Number: _____

G. HOUSEHOLD ARRANGEMENT (PLEASE READ CAREFULLY AND RESPOND THOROUGHLY)

1. In 2021, did friends, relatives, or others help support you and/or your household members?

No

Yes (If "Yes," also complete section G2.)

2. If "Yes," check the
- one
- box that applied to you in 2021, and fill in the spaces for the
- one
- you checked:

A) (Name) _____ (Relationship) _____ allowed us to live with them rent-free in 2021.
They did not pay for any obligations on our behalf.B) (Name) _____ (Relationship) _____ allowed us to live with them in 2021, and they
helped pay for some of our personal obligations (example: bills, transportation). Also complete section G3.C) We had our own residence in 2021, but (Name) _____ (Relationship) _____ provided
financial assistance to help pay for some of our personal obligations (example: bills, transportation). Also complete section G3.

3. If someone helped you pay for personal obligations (see 2B/2C above) in 2021, complete the following section accordingly.

Person(s) Receiving Support	Support Helped Pay For	2021 Annual Amount
		\$
		\$
		\$

H. ADDITIONAL INFORMATION (PLEASE READ CAREFULLY AND RESPOND THOROUGHLY)**REQUIRED—Related to 2021:** Please provide a written description of how you and your household members lived on the income reported for 2021. Insufficient information will delay processing of your file. DO NOT LEAVE BLANK.**REQUIRED—Related to current situation:** If your current situation is significantly different than in 2021, explain here. (Give specific details about how your situation has changed, including current employment and benefits received, and if where you live/who you live with is different. Be prepared to provide documentation if asked.) If your current situation is basically the same as in 2021, clearly state that. Insufficient information will delay processing of your file. DO NOT LEAVE BLANK.**I. CERTIFICATION AND SIGNATURE**

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. Falsification of information is subject to prosecution.

Student's Signature_____
Date_____
Spouse's Signature (Optional)_____
Date