



VERIFICATION STATEMENT

2009-2010

TU SCHOOL CODE 003185

Mandatory Signatures Required

OFFICE OF STUDENT FINANCIAL SERVICES • COLLINS HALL • 800 SOUTH TUCKER DRIVE • TULSA, OKLAHOMA 74104-9700 • 918-631-2526 • Fax: 918-631-5105

Name _____

Student ID/SSN _____

Federal regulations require that we check the accuracy of the information you and your spouse or parents provided on your financial aid application. To help ensure accuracy, please provide the information requested below. **All students must complete the Certification and Worksheets on the back of this form.** Married students do not provide parental information.

1. INFORMATION ABOUT FAMILY MEMBERS

DEPENDENT STUDENTS:

List below the people your parents will support in 2009-2010. Include your parents and people who lived with and received more than half their support from your parents at the time you applied for financial aid and who will continue to get this support between July 1, 2009, and June 30, 2010. Enter the name of the college only for family members (do not include parents) who will be attending at least half-time (six credit hours) and are working toward a degree or certificate at a college eligible to participate in federal student aid programs.

INDEPENDENT STUDENTS:

List below the people you (and your spouse) will support in 2009-2010. Include (your spouse and) people who lived with and received more than half their support from you (and your spouse) at the time you applied for financial aid and who will continue to get this support between July 1, 2009, and June 30, 2010. Enter the name of the school or college only for family members who will be attending at least half-time (six credit hours) and are working toward a degree or certificate at a college eligible to participate in federal student aid programs.

	<u>FULL NAME OF FAMILY MEMBER</u>	<u>RELATIONSHIP TO STUDENT</u>	<u>AGE</u>	<u>NAME OF SCHOOL OR COLLEGE IN 2009-2010</u>
1.	<i>Student /Self</i>	<i>Student/Applicant</i>	<i>()</i>	<i>The University of Tulsa</i>
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

This form is not official until you have completed and signed the back.



2. 2008 INCOME INFORMATION

TAXABLE INCOME

If your parent(s) filed or will file a 2008 U.S. income tax return (or returns), a **signed** photocopy of Form(s) 1040/1040A/1040EZ/Telefile must be returned to us with this statement if not already on file with our office.

If you filed or will file a 2008 U.S. income tax return (or returns), a **signed** photocopy of Form(s) 1040/1040A/1040EZ/Telefile must be returned to us with this statement if not already on file with our office. If married, your spouse's Form(s) 1040/1040A/1040EZ/Telefile must also be included.

Note: If you, your spouse, or your parent(s) did not and will not file a 2008 income tax return, complete the below Worksheet along with the Non-Tax Filer Statement.

NON-TAX FILERS STATEMENT (Complete only if not filing a tax return for 2008)

I (We) certify that no income tax return has been or will be filed for the 2008 calendar year and that all 2008 income and benefits are reported in this Statement. Signature(s) must be provided for each family member not filing a tax return. Non-tax filers may be requested to provide verification of non-tax filer status from the IRS.

If you have earnings and did not file a tax return, report earnings here:

	Income	Source	Non-Tax Filers Signature	Date
Student	\$ _____	_____	_____	_____
Father/Stepfather	\$ _____	_____	(If Applicable)	_____
Mother/Stepmother	\$ _____	_____	(If Applicable)	_____
Spouse	\$ _____	_____	(If Applicable)	_____

STUDENT/SPOUSE

Additional Financial Information Report Annual Amounts

PARENTS

\$	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits)	\$
\$	Veterans' noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/ or VA Educational Work-Study allowances	\$
\$	Any other untaxed income or benefits not reported elsewhere on Worksheets A and B, such as workers' compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, disability, etc. Tax filers only: report combat pay not included in AGI (FAFSA questions 35 & 79). Don't include student aid, Workforce Investment Act educational benefits, combat pay if you are not a tax filer, or benefits from flexible spending arrangements, (e.g., cafeteria plans).	\$
\$	Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form	\$
\$	Child support you paid because of a divorce or separation as a result of a legal requirement. Don't include support for children in your (or your parent's) household, as reported on the FAFSA.	\$

CERTIFICATION

By signing this Verification Statement, we certify that all information reported in support of the student's application for federal student aid is complete and correct.

Student's Signature

Date

Father/Mother/Stepparent or Student's Spouse Signature (If Applicable)

Date