



UH ID Number/Username

Last Name

Phone Number (include area code)

Last Name

First Name

M. I.

Phone Number (include area code)

Your application for federal financial aid was selected for review in a process called 'Verification'. In this process, we will be comparing information from your FAFSA with your Federal tax information, W-2 forms, and/or other required documents. If there are differences between your application information and verification documents submitted, corrections will be made to your application and your information will be reprocessed.

You must complete and sign this worksheet and submit it along with any other required documents. We cannot continue processing your financial aid application until verification has been completed.

Complete verification as soon as possible to avoid delays with your financial aid. Contact the Financial Aid Office at (808) 932-7449 if you need assistance.

A. FAMILY INFORMATION

List the people in your parents' household. Include the following:

- yourself and your parent(s) you live with (including stepparent), and
• your parents' other children, if (a) your parents provide more than half of their support from July 1, 2022 through June 30, 2023, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
• other people if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2022 through June 30, 2023.

Write the names of all family members. Also write in the name of the college for any family member, excluding your parent(s), who will be attending college at least half-time between July 1, 2022 and June 30, 2023, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

Table with 4 columns: Full Name, Age, Relationship, College. Pre-filled with 'Self' and 'University of Hawaii at Hilo'.

The University of Hawai'i at Hilo does not discriminate on the basis of age, race, sex, color, national origin, or disability in its programs and activities. For more information or inquiries regarding these policies, please contact the Equal Employment/ Affirmative Action Office at (808) 932-7640.

**B. STUDENT INCOME INFORMATION TO BE VERIFIED – *Check the box that applies.***

**IRS TAX FILERS** - Complete this section if you filed a U.S. IRS tax return.

I, the student:

**have used** the IRS Data Retrieval Tool to transfer my 2020 IRS income information into my FAFSA, either on the initial FAFSA or when making a correction.

**have submitted/will submit** a signed copy of my 2020 U.S. Tax Return (and Schedules 1, 2, and/or 3, if applicable) **OR** a copy of my 2020 U.S. Tax Return Transcript obtained from the IRS. *A transcript can be obtained: 1) online at [www.irs.gov](http://www.irs.gov) and clicking on "Get My Tax Record", 2) by calling 1-800-908-9946, or 3) by using IRS Form 4506-T: Request for Transcript of Tax Return (Item 6a).*

**NON- IRS TAX FILERS** - Complete this section if you filed a non-U.S or foreign tax return or received a Wage & Tax Statement from one of the Freely Associated States.

I, the student:

**have submitted/will submit** a copy of my 2020 transcript that was obtained at no cost from the relevant taxing authority of a U.S Territory (Guam, American Samoa, the U.S. Virgin Islands) or Commonwealth (Puerto Rico and the Northern Mariana Islands) **OR** a copy of my signed tax document with proof of fees charged for an official transcript.

**have submitted/will submit** a signed copy of my 2020 wage & tax statement from one of the Freely Associated States (Federated States of Micronesia, Palau, and the Marshall Islands). In 2020 I/we received \$\_\_\_\_\_ (USD) in wages/income and paid \$\_\_\_\_\_ (USD) in taxes.

**have submitted/will submit** a signed copy of my 2020 foreign country tax return. In 2020 I/we received \$\_\_\_\_\_ (USD) in wages/income and paid \$\_\_\_\_\_ (USD) in taxes.

**TAX NON-FILERS** - Complete this section if you did not file, and were not required to file a tax return with your appropriate taxing authority.

I, the student:

**was not** employed and earned no income from work in 2020.

**was** employed in 2020 and have listed below the names of all employers and the amount earned from each employer in 2020. **I have attached copies of all 2020 W-2 forms issued to me by my employers.**

*List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, attach a separate page with your name and ID number at the top.*

Employer's Name	2020 Amount Earned

**SIGN THIS WORKSHEET** - By signing this worksheet, I, the student certify that all the information reported to qualify for Federal student aid is complete and correct.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

**C. PARENT INCOME INFORMATION TO BE VERIFIED – Check the box that applies.**

**IRS TAX FILERS** - Complete this section if you, the parent(s), filed a U.S. IRS tax return.

I/we, the parent(s):

**have used** the IRS Data Retrieval Tool to transfer my/our 2020 IRS income information into my FAFSA, either on the initial FAFSA or when making a correction.

**have submitted/will submit** a signed copy of my/our 2020 U.S. Tax Return (and Schedules 1, 2, and/or 3, if applicable) **OR** a copy of my/our 2020 U.S. Tax Return Transcript obtained from the IRS. *A transcript can be obtained: 1) online at [www.irs.gov](http://www.irs.gov) and clicking on "Get My Tax Record", 2) by calling 1-800-908-9946, or 3) by using IRS Form 4506-T: Request for Transcript of Tax Return.*

**NON-IRS TAX FILERS** - Complete this section if you, the parent(s), filed a non-U.S. or foreign tax return or received a Wage & Tax Statement from one of the Freely Associated States.

I/we, the parent(s):

**have submitted/will submit** a copy of my/our 2020 transcript that was obtained at no cost from the relevant taxing authority of a U.S Territory (Guam, American Samoa, the U.S. Virgin Islands) or Commonwealth (Puerto Rico and the Northern Mariana Islands) **OR** a copy of my signed tax document with proof of fees charged for an official transcript.

**have submitted/will submit** a signed copy of my/our 2020 wage & tax statement(s) from one of the Freely Associated States (Federated States of Micronesia, Palau, and the Marshall Islands). In 2020 I/we received \$\_\_\_\_\_ (USD) in wages/income and paid \$\_\_\_\_\_ (USD) in taxes.

**have submitted/will submit** a signed copy of my/our 2020 foreign country tax return(s). In 2020 I/we received \$\_\_\_\_\_ (USD) in wages/income and paid \$\_\_\_\_\_ (USD) in taxes.

**TAX NON-FILERS** - Complete this section if you, the parent(s), did not file and were not required to file a tax return with your appropriate taxing authority.

**You, the parent(s), must provide confirmation of non-filing dated on or after October 1, 2021. A confirmation of non-filing can be obtained from:**

- the IRS by using IRS Form 4506-T (check box 7 and enter '12/31/2020' in item 9).
- a taxing authority of a U.S Territory (Guam, American Samoa, the U.S. Virgin Islands) or Commonwealth (Puerto Rico or the Northern Mariana Islands).
- a taxing authority of one of the Freely Associated States (Federated States of Micronesia, Palau, the Marshall Islands).

**If you are unable to obtain confirmation of non-filing, please submit a signed statement indicating you have attempted but was unable to obtain the required documentation and have not filed and are not required to file a 2020 tax return.**

I/we, the parent(s):

**was not** employed and earned no income from work in 2020 and will submit a verification of non-filing from the appropriate taxing authority.

**was** employed in 2020 and have listed below the names of all employers and the amount earned from each employer in 2020. **I have attached copies of all 2020 W-2 forms or proof of wages issued to myself and/or my spouse by employers and a verification of non-filing from the appropriate taxing authority.**

*List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, attach a separate page with your name and ID number at the top.*

Employer's Name	2020 Amount Earned

**SIGN THIS WORKSHEET** - By signing this worksheet, I, the parent certify that all the information reported for my child/dependent to qualify for Federal student aid is complete and correct.

Parent Signature (required for dependent students)

Date

**Return this form along with any other required documentation to:**

UH Hilo Financial Aid Office, 200 W. Kawili Street, Hilo, HI 96720-4091, by email: [uhhfao@hawaii.edu](mailto:uhhfao@hawaii.edu) or by fax: 808-932-7797