

2023-2024 Dependent Verification of Additional Financial Information

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This form verifies additional financial information reported on the FAFSA. The total additional financial information reported on the FAFSA is greater than the Adjusted Gross Income (AGI) for either the student or parent(s). The combined total of taxable amounts should not exceed the AGI. Please confirm the amounts for additional financial information reported on the FAFSA.

	Student Information			
			University ID (UID) -	- (required)
Last Name First Name M.I.		U		
Student Cell Phone Number Parent Phone Number				
В.	Additional Financial Information (Enter "0" for items that do not apply)		Amounts for 2021 Student	Amounts for 2021 Parent(s)
а	Education credits (American Opportunity and Lifetime Learning tax credits) Reported on your 2021 IRS Tax Form 1040, Schedule 3, Part I, line 3.		\$	\$
b	Child support paid Child support you paid* in 2021 for children not included in your household on the 2023-2024 FAFSA Verification Worksheet.		\$	\$
	* Only child support paid as the result of a divorce, separation, or legal requirement			
С	Taxable earnings from need-based employment programs List any amount earned from federal Work-Study and need-based employment portions of fellowships and assistantships.		\$	\$
d	Taxable college grant and scholarship aid Only include amounts reported as taxable income* on your 2021 federal IRS Tax Form 1040, line 1. * Do not include grant/scholarship amounts not added to line 1 of your tax return. Be sure to include AmeriCorps benefits and grant/scholarship portions of fellowships & assistantships.		\$	\$
е	Combat pay or special combat pay Enter the taxable amount that was included in your adjusted gross income (AGI) on your tax return. Do not include combat pay if it is not on your tax return.		\$	\$
f	Earnings from work under a cooperative ed (Co-op offered by a college)	\$	\$	
C. Certification - We certify that all information is complete and correct.				
Signatures cannot be typed.				
Student Signature Date Parent Signature				Date

VRDAFE Date Stamp: