University of Texas at Arlington Office of Financial Aid

2023-2024 Verification of Income – STUDENT

Office: UAB, Room 252 Phone: 817-272-3561 Fax: 817-272-3555 Mail: PO Box 19199, Arlington, TX 76019 Email: fao@uta.edu PLEASE DO NOT SUBMIT SENSITIVE PERSONAL INFORMATION VIA EMAIL

Student's Name:

Section 1 – 2021 Income Information for Student

UTA ID:

Please check only one box that applies to you:

I was not employed in 2021 and had no earned income.

I was employed in 2021 and filed a 2021 income tax return.

□ I was employed in 2021 but did <u>not</u> file a 2021 income tax return. Below are the names of my employers and the amounts earned from each employer in 2021. Copies of my 2021 W-2's or the equivalent must be submitted to the UTA Office of Financial Aid to confirm these amounts.

Employer's Name	2021 Income Earned	W-2 Attached
	\$	🗆 Yes 🗆 No
	\$	🗆 Yes 🗆 No
	\$	🗆 Yes 🗆 No

Section 2 – 2021 Incom	e Information for Student's Sp	ouse	
🗌 I do not have	e a spouse – SKIP TO SECTION 3		
My spouse's name is:	pouse's name is:Last 4 digits of SSN or ITIN:		
Please check only one box that applies to your spouse:			
My spouse was not employed in 2021 and had no ea	rned income.		
My spouse was employed in 2021 and filed a 2021 in	come tax return.		
My spouse was employed in 2021 but did <u>not</u> file a 2 the amounts earned from each employer in 2021. Co UTA Office of Financial Aid to confirm these amounts	opies of his/her 2021 W-2's or the		
Employer's Name	2021 Income Earned	W-2 Attached	
	\$	🗆 Yes 🗆 No	
	\$	🗆 Yes 🗆 No	
	\$	🗆 Yes 🗆 No	
Section 3 – Certification and Signature(s)			
Signatures must be ha	nd-written and not typed or forge	:d	
I certify that the information reported on this form is comp	lete and accurate.		

Student's Signature (Required)

Date

Parent's Signature (Required if Dependent)

Date

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

