

# Verification of Income & Expenses

**2020-2021** (Fall 2020, Spring 2021, Summer 2021)



Office of Financial Aid  
UNIVERSITY OF COLORADO BOULDER

Name: \_\_\_\_\_  
Student's Name (Last, First, M.I.)

ID: \_\_\_\_\_  
Student Identification Number (SID)

This form is used to verify student and parent income and expenses in the 2018 tax year. The income listed for your family on the *Free Application for Federal Student Aid* (FAFSA) appears to be low for the family size reported. Please list all of the resources and expenses you and your parent(s) received from **January 1, 2018 to December 31, 2018**. Please be as accurate as possible as additional documentation may be requested.

Resources (Enter "0" if none; do not leave any lines blank)	Student	Parent(s)
Income from working <b>Do not include business losses</b>		
Alimony paid to you		
Benefits from a federal program such as Supplemental Security Income, TANF, WIC, SNAP, etc.		
Social Security benefits		
Veterans non-educational benefits		
Veterans educational benefits		
Withdrawals from cash, checking, investments and/or savings		
Financial aid or scholarships		
Personal loans or credit card charges		

Please provide **annual expenses for 2018**:

Expenses (Enter "0" if none; do not leave any lines blank)	Student	Parent(s)
Housing (rent, mortgage, utilities, etc.) <i>amount/year</i>		
Transportation (car payment & insurance, bus pass, gasoline, etc.)		
Medical care (health insurance, prescriptions, appointments, etc.)		
Food, clothing and personal care		
Education expenses paid out-of-pocket <b>Do not include expenses paid with grants, loans, scholarships, etc.</b>		
Other (child support, alimony, travel, etc.) <b>Specify:</b>		

1. Did you, the student, receive or have any money paid on your behalf in 2018 from anyone other than the parent(s) you live with?

☐ Yes ☐ No

If yes, please list:

Who provided money	Relationship to student	Purpose (i.e. rent, utilities, tuition)	Annual 2018 amount

**PLEASE SEE OTHER SIDE FOR REMAINDER OF FORM, INCLUDING SIGNATURE CERTIFICATION**

Please submit your form by mail, fax or online at <https://www.colorado.edu/financialaid/forms/secure-document-upload>  
77 UCB • Boulder, Colorado 80309-0077 • fax 303 492 0838 • [www.colorado.edu/financialaid](http://www.colorado.edu/financialaid)

Name: \_\_\_\_\_  
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2. Did your parent(s) receive money from anyone to pay a specific expense in 2018?

☐ Yes ☐ No

If yes, please list:

Who provided money	Relationship to parent	Purpose (i.e. rent, utilities, tuition)	Annual 2018 amount

3. Did your parent(s) have any money paid on their behalf in 2018?

☐ Yes ☐ No

If yes, please list:

Who provided money	Relationship to parent	Purpose (i.e. rent, utilities, tuition)	Annual 2018 amount

4. If living expenses were exceptionally low in 2018 for you or your parent(s), please explain how household living expenses were met and list any special housing accommodations (if applicable):

5. By signing this form, I certify that all the information provided is complete and accurate.

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date

Electronic and type signatures are not accepted.