Conflicting Information Verification Worksheet

Per new 2017-18 federal financial aid guidelines, the financial aid office must resolve income issues related to differences in the completed 2016-17 FAFSA and 2017-18 FAFSA. The 2015 income information was required to be reported on both aid year FAFSA applications. Students that are identified for review are ineligible for federal funding, including federal work study, until the issue is resolved. We appreciate your assistance in resolving the conflicting information as soon as possible.

This form must be completed and signed by both the dependent student and parent. For independent students that are married (independent for financial aid), spouse’s signature is optional. If the answer is zero or if the question does not apply to you, write “0”, do not leave blank.

A. Additional Financial Information and Untaxed Income

Use the table below to report annual (not monthly) amounts. If the amount is zero, or the question does not apply to you, write “0.” Do not leave items blank. This section is taken directly from the FAFSA.

<table>
<thead>
<tr>
<th>2015 Untaxed Income</th>
<th>PARENT(S) OR SPOUSE</th>
<th>STUDENT’S</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing, food, and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don’t include the value of on-base military housing or the value of a basic military allowance for housing.</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Veterans non-education benefits such as Disability Death Pension or Dependency &amp; Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other untaxed income not reported elsewhere on this form, such as workers’ compensation, disability, etc. Also include the Health and Savings account deduction from IRS form 1040, line 25.</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>DO NOT include</strong> extended foster care benefits, student aid, earned income credit, child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, on base military housing or a military housing allowance, combat pay, (if you are not a tax filer), benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Money received, or paid on the student’s behalf (e.g. bills), not reported elsewhere on the FAFSA. This includes money that you received from a parent or other person whose financial information is not reported on this form and that is not part of a legal child support agreement.</td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

B. Need-based Employment (Work Study, Fellowships, Assistantships) and Cooperative Education Program Earnings

1. Did you earn wages in the 2015 tax year through an on or off campus work study job for which you received a W2? Check box yes or no.
   - Yes *
   - No

*If yes: List the amount earned and name of employer(s):

2. Did you earn wages in the 2015 tax year through a cooperative education program offered by a college for which you received a W2? Check box yes or no.
   - Yes *
   - No

*If yes: List the amount earned and name of employer(s):

C. Child Support Paid (DO NOT include foster care or adoption payments in this section)

During 2015 was child support PAID by any member of the household listed above?
   - Yes *
   - No
Student’s Name: ____________________________________________ TUID: ___________________

*If yes:

Name of household member who PAID child support: _________________________________

Amount of child support PAID by household member in 2015: $_____________________

Name of person to whom child support was PAID: _________________________________

Name of child(ren) for whom child support was PAID in 2015:
  o Please note that the children listed below for whom child support was paid cannot be included on the FAFSA
    for number in the household.

________________________________________________________________________________
________________________________________________________________________________

D. Child Support Received

During 2015 was child support RECEIVED by any member of the household listed above?

[ ] Yes *  [ ] No

*If yes:

Amount of child support RECEIVED in 2015: $____________________

Name of household member who RECEIVED child support in 2015: ______________________

Name of child(ren) for whom child support was RECEIVED in 2015:

________________________________________________________________________________
________________________________________________________________________________

E. Sign this Worksheet

Each person signing this form certifies that all the information reported on it is complete and correct. The student and at least one parent must sign and date for dependent students. For independent students that are married (independent for financial aid), spouse's signature is optional.

_____________________________________________________________  Student  Date

_____________________________________________________________  Parent/Spouse  Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

J. Submit signed and completed worksheet to the SFS office.

  o SFS highly recommends students upload signed and completed forms in the ‘Student Tools’ tab of the TUPortal.
    Students/Parents also have the option to mail or fax documentation to:

    Temple University, Student Financial Services
    1801 N. Broad Street
    Ground Floor, Conwell Hall
    Philadelphia, PA 19122
    (215) 204-2244 (phone)
    (215) 204-5897 (fax)