



Student Financial Aid
 2308 Rendleman Hall Campus Box 1060
 Edwardsville, IL 62026-1060
 Phone: (618) 650-3880 Fax: (618) 650-3885
 Email: finaid@siue.edu Homepage: www.siue.edu/financialaid

**Verification Inquiry:
 Income Exclusion
 2009-2010**

INCWS

Name _____ University ID _____

Additional Financial Information

Your 2009-2010 federal financial aid application has been selected for verification, a process required by federal legislation. Requested information must be submitted, as this information will be used to finalize your eligibility for federal financial aid. Aid cannot be offered until the verification process has been completed. A prompt response to requested additional information, along with required signatures on this form, will reduce the processing time of the federally required verification.

You/your spouse or your parent's (if dependent student) have reported an income exclusion that we cannot verify from the information submitted. If you reported an income exclusion due to child support paid for a child or children not included in your household size, review the below definition of child support paid, then supply the information requested in the box below. If the amount reported was in error, check the box above the Certification Statement confirming that the amount reported was in error.

Child Support Paid	<p>If you/your spouse or your parents (if a dependent student) paid child support in 2008, complete the section below:</p> <p align="center">Child Support IS:</p> <ul style="list-style-type: none"> • Money paid by student/spouse, or by parent(s) to a separated or divorced spouse to help with the support of the child/children. • For a child/children NOT living in the household (as reported on the FAFSA) and NOT included in the household size number (refer to Guideline to Reporting Household Size Information for Dependent Students/Independent Students on the Institutional Verification Form). <p align="center">Child Support IS NOT:</p> <ul style="list-style-type: none"> • Money paid by student/spouse, or parent(s) for child day care expenses. • For children living in your/your parents' household (as reported on the FAFSA) and included in the household size number (refer to Guideline to Reporting Household Size Information for Dependent Students/Independent Students on the Institutional Verification Form). <p>Total amount of child support paid by you/your spouse or your parents in 2008: \$ _____</p> <p>Names and ages of children for whom support was paid by student /spouse or parent(s) in 2008 and name and address of person receiving support for those children.</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; border-bottom: 1px solid black;">Name of child</td> <td style="width:15%; border-bottom: 1px solid black;">Age</td> <td style="border-bottom: 1px solid black;">Name and address of person receiving support</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Name of child</td> <td style="border-bottom: 1px solid black;">Age</td> <td style="border-bottom: 1px solid black;">Name and address of person receiving support</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Name of child</td> <td style="border-bottom: 1px solid black;">Age</td> <td style="border-bottom: 1px solid black;">Name and address of person receiving support</td> </tr> </table>	Name of child	Age	Name and address of person receiving support	Name of child	Age	Name and address of person receiving support	Name of child	Age	Name and address of person receiving support
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Need-Based Employment	<p>If you reported an income exclusion based on taxable earnings from need-based employment programs, such as Federal Work-Study or need-based employment portions of fellowships and assistantships, contact the university where these funds were earned and request they mail you confirmation of the type and amount of funds earned. Then submit that letter to us for processing of your verification. If the amount reported was in error, check the box below.</p>									

Check here if there is a reporting error, and there is NO additional Income Exclusion

Section IV. Certification Statement for Dependent Students

I (we) certify that the information I (we) have provided is accurate and complete to the best of my (our) knowledge.

Student Signature	Date	Parent Signature	Date
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