Independent Student

Office Use Only 2/16/06
Date Entered_______
By _______________

Verification Form 2006-2007
Texas A&M University-Commerce

Please Print Clearly Using Dark Blue or Black Ink

A. Student Information

Last Name ______ First Name ______ MI ______ CWID or Social Security Number ______

B. Household Information

List the people in your household; include:

- yourself, and your spouse if you have one, and
- your children, if you provide more than half of their support from July 1, 2006 through June 30, 2007, and
- other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2006 through June 30, 2007.

Write the names of all household members. Also, write the name of the college for any household member, excluding your parent(s), who will be attending college at least half-time (6 credits or more) between July 1, 2006 and June 30, 2007, and will be enrolled in a degree or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	College/University
1		**Self**	**A&M-Commerce**
2			
3			
4			
5			
6			
7			

C. Student Tax Forms and Income From Work Information (all applicants)

- Check one box only. **Tax returns include the 2005 IRS Form 1040, 1040A, 1040EZ, TeleFile Tax Record, a tax return from Puerto Rico or a foreign income tax return.** **<u>Do not include schedules or forms not listed.</u>** If you did not keep a copy of the tax return, request a copy from your tax preparer or a copy of an Internal Revenue Service form that lists tax account information.
  - ☐ Check and attach signed tax return. (See above. Do not include schedules or forms not listed.)
  - ☐ Check and complete: signed tax return will be submitted to the school by ______________________ (date).
  - ☐ Check if you will not file and are not required to file a 2005 U.S. Income Tax Return.
- If you will not file and are not required to file a 2005 Federal Income Tax Return, list below your employer(s) and any income received in 2005.

Sources (Use the W-2 form or other earnings statements.)	Amount

D. Spouse Tax Forms and Income From Work Information (if student is married)

- Check one box only. **Tax returns include the 2005 IRS Form 1040, 1040A, 1040EZ, TeleFile Tax Record, a tax return from Puerto Rico or a foreign income tax return.** **<u>Do not include schedules or forms not listed.</u>** If your spouse did not keep a copy of the tax return, request a copy from the tax preparer or a copy of an Internal Revenue Service form that lists tax account information.
  - ☐ Check if you and your spouse did or will file a joint return.
  - ☐ Check and attach signed tax return if your spouse filed a separate return. (Do not include schedules or forms not listed.)
  - ☐ Check and complete: signed tax return will be submitted to the school by ______________________ (date).
  - ☐ Check if your spouse will not file and is not required to file a 2005 U.S. Income Tax Return.
- If your spouse did not file and is not required to file a 2005 Federal income tax return, list below your spouse's employer(s) and any income received in 2005.

Sources (Use the W-2 form or other earnings statements.)	Amount

E. Student and Spouse Worksheet A

Please do not leave any blanks. Enter an amount for all of the following that apply to you or your spouse. If a category does not apply to you or your spouse, enter a "0".	**STUDENT (and SPOUSE)**		
	Amount per month	**Number of months received**	**Total amount received**
Earned income credit from IRS Form 1040–line 66a; 1040A–line 41; 1040EZ–line 8; or Telefile–line L.	XXXXXX	XXXXX	
Additional child tax credit from IRS Form 1040–line 68 or 1040A–line 42	XXXXXX	XXXXX	
Welfare benefits, including Temporary Assistance for Needy Families (TANF). Don't include food stamps or subsidized housing.			
Social Security benefits for all household members received that were not taxed (such as SSI)			

F. Student and Spouse Worksheet B

Please do not leave any blanks. Enter an amount for all of the following that apply to you or your spouse. If a category does not apply to you or your spouse, enter a "0".	**STUDENT (and SPOUSE)**		
	Amount per month	**Number of months received**	**Total amount received**
Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S	XXXXXX	XXXXX	
IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans from IRS Form 1040–total of lines 28 & 32 or 1040A–line 17	XXXXXX	XXXXX	
Child support you **received** for all children. Don't include foster care or adoption payments.			
Tax exempt interest income from IRS Form 1040–line 8b or 1040A–line 8b			
Foreign income exclusion from IRS Form 2555–line 43 or 2555EZ–line 18	XXXXXX	XXXXXX	
Untaxed portions of IRA distributions from IRS Form 1040–lines (15a minus 15b) or 1040A–lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.	XXXXXX	XXXXXX	
Untaxed portions of pensions from IRS Form 1040–lines (16a minus 16b) or 1040A–lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.	XXXXXX	XXXXXX	
Credit for federal tax on special fuels from IRS Form 4136–line 15– nonfarmers only.			
Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits)			
Veterans' noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances	XXXXXX	XXXXXX	
Any other untaxed income or benefits not reported elsewhere on Worksheets A and B, such as workers' compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, disability, etc.Tax filers only: report combat pay not included in AGI. **Don't include** student aid, Workforce Investment Act educational benefits, combat pay if you are not a tax filer, or benefits from flexible spending arrangements, e.g., cafeteria plans.	XXXXXX	XXXXXX	
Money **received**, or paid on your behalf (e.g., bills), not reported elsewhere on this form	XXXXXX	XXXXXX	

G. Student and Spouse Worksheet C

Please do not leave any blanks. Enter an amount for all of the following that apply to you or your spouse. If a category does not apply to you or your spouse, enter a "0".	**STUDENT (and SPOUSE)**		
	Amount per Month	**Number of months received**	**Total amount received**
Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040-line 50 or 1040A-line 31			
Child support you **paid** because of divorce or separation or as a result of a legal requirement. Don't include support for children in your (or your parents') household.	XXXXXX	XXXXXX	
Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships			
Student grant and scholarship aid reported to the IRS in your (or your parents') adjusted gross income. Includes AmeriCorps benefits (awards, living allowances, and interest accrual payments), as well as grant or scholarship portions of fellowships and assistantships.	XXXXXX	XXXXXX	

H. Sign this form

By signing this form, we certify that all of the information reported on this worksheet is complete and correct. If married, spouse's signature is optional.

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

____
Student Date

____
Spouse Date

DON'T FORGET TO SIGN YOUR TAX FORMS.

With few exceptions, you have the right to request, receive, review and correct information about yourself collected by this form.