



Office of Financial Aid
 800 W Campbell Rd ROC22 Richardson, TX 75080
 972-883-2941 ph | 972-883-6803 fax
 financial-aid@utdallas.edu

2021-2022 VERIFICATION WORKSHEET

Parent Untaxed Income

Use your parents' 2019 untaxed income information to complete the following worksheet. **If any item does not apply, please enter "N/A" for Not Applicable.**

Once we have received all requested documents on your To Do List, please allow our office up to 3 weeks to review and process the documents submitted.

Student Information	
Name (Last, First, Middle Initial)	
UTD ID	
Child Support Received	
List the amount of child support payments your parent(s) received in 2019 for the children in their household. Do not include foster care or adoption payments.	
Name of Child for Whom Support Was Received	Total Amount Received in 2019
Housing, Food, and Living Allowances	
List the cash value of the housing, food, and living allowances your parent(s) received in 2019. These benefits are often received by members of the military or clergy. Do not include the value of on-base military housing or the value of a basic military allowance for housing.	
Type of Benefit	Total Amount Received in 2019
Veterans Non-Education Benefits	
List the total amount of veterans non-education benefits that your parent(s) received in 2019. This amount includes Disability, Death Pension, Dependency and Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	
Type of Benefit	Total Amount Received in 2019

With few exceptions, you are entitled on your request to be informed about the information UTD collects about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information. Under Section 559.004 of the Texas Government Code, you are entitled to have UTD correct information about you that is held by us and that is incorrect.



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UTD ID: _____ STUDENT'S NAME: _____

Other Untaxed Income

List the total amount of any other untaxed income and benefits that your parent(s) received in 2019. This amount includes earnings/benefits such as: workers' compensation, disability benefits, the untaxed portions of health savings accounts from line 12 of their IRS Form Schedule 1 (Form 1040), Black Lung Benefits, Railroad Retirement Benefits, etc.

Do not include: extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Innovation and Opportunity Act educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Source of Income	Total Amount Received in 2019

Signature and Certification

Each person signing this worksheet certifies that all of the information provided above is complete and correct.

Parent Signature _____ Date _____

Student Signature _____ Date _____

Please submit the completed worksheet with handwritten (not typed) signatures to the Office of Financial Aid by:

Email: financial-aid@utdallas.edu or **Fax:** 972-883-6803 or **In-person drop-off:** Student Services Building, first floor

-To protect your personal information, please use your UT Dallas email when submitting documents