R _____ Student Rocket Number

_____ Student Last Name

_____ Student First Name

2024-25
DEPENDENT STUDENT
ADDITIONAL FINANCIAL INFORMATION WORKSHEET

COMPLETE WITH BLACK INK ONLY.

The Office of Student Financial Aid is required to resolve conflicting information reported on the Free Application for Federal Student Aid (FAFSA). Processing of your federal aid application cannot continue until you complete and return this worksheet. Parent information reported below should include the parent(s)/stepparent whose information was provided on your FAFSA.

If the answer to any question is zero or does not apply, please answer $0.

2022 Additional Financial Information	**Student**	**Parent(s)/ Stepparent**
Provide the amount of taxable student grant and scholarship aid that you and your parent(s)/stepparent included in earnings reported on your 2022 federal tax return (Form 1040 - line 1a or Schedule 1 [Form 1040] – line 8r). ***If you included taxable student grant and scholarship aid in earnings reported on your 2022 federal tax return, please attach a signed copy of your 2022 Form 1040 and your 2022 W-2s.*** If you did not include taxable student grant and scholarship aid in earnings reported on your 2022 federal tax return, enter a zero (0) on this line. **DO NOT ENTER THE AMOUNT LISTED ON THE IRS FORM 1098T, TUITION STATEMENT.**	$	$
Provide the amount of taxable AmeriCorps benefits (awards, living allowances, and interest accrual payments) that you and your parent(s)/stepparent received in 2022. If reported, this amount will appear on your 2022 federal tax return (Schedule 1 [Form 1040] - line 8i or line 8z). ***If taxable AmeriCorps benefits were reported on your 2022 federal tax return, please attach a copy of your 2022 Schedule 1 (Form 1040) and your 2022 Form 1099-MISC.***	$	$

STUDENT AND PARENT HANDWRITTEN SIGNATURES AND DATES ARE REQUIRED BELOW.

ELECTRONIC SIGNATURES ARE NOT ACCEPTABLE ON THIS FORM.

Certification Statement: By signing this worksheet, I (we) certify that all the information reported above, used to determine eligibility for federal student financial aid, is complete and accurate. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

_____
Student Signature - *use full legal name* Date

_____
Parent Signature - *use full legal name* Date

Questions? Please contact Rocket Solution Central (RSC) at 419.530.8700.

TO RETURN THIS FORM:

Upload to: *myUT.utoledo.edu*
"My Financial Aid"
"Financial Aid Documentation Upload"

Mail to: The University of Toledo
Office of Student Financial Aid
2801 West Bancroft Street, Mail Stop 314
Toledo, OH 43606-3390

In person: Rocket Solution Central
1200 Rocket Hall

Fax to: 419.530.5835