₹		
Student Rocket Number	Student Last Name	Student First Name



2024-25 PARENT UNTAXED INCOME 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 FAFSA cannot continue until you complete and return this worksheet. Information reported below should include the parent(s)/stepparent whose information was provided on your FAFSA.

If the answer is zero or does not apply, please answer \$0.

UNTAXED INCOME	PARENT(S)/ STEPPARENT
CALENDAR YEAR CHILD SUPPORT RECEIVED:	
Enter the total amount of child support received (for all children) for the most recent calendar year that ended prior to the date the student filed the FAFSA.	\$
Example: If the student filed the FAFSA on March 1, 2024, the most recent calendar year that ended prior to the date the student filed the FAFSA would be 2023 and you would report the total amount of child support received (for all children) for calendar year 2023.	

PARENT HANDWRITTEN SIGNATURE AND DATE ARE REQUIRED BELOW.

AN ELECTRONIC SIGNATURE IS NOT ACCEPTABLE ON THIS FORM.

Certification Statement: By signing this worksheet, I 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.

		TO RETURN THIS FORM:		
Parent Signature – use full legal name	Date	Upload to:	myUT.utoledo.edu "My Financial Aid" "Financial Aid Documentation Upload"	
Questions? Please contact Rocket Solution Central	I (RSC) at 419.530.8700.	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	

UIW1-D 20231128