

LAST NAME _____ FIRST NAME _____
SSN _____ STUDENT # _____

2009-2010 Financial Aid Verification Form

Clarkson University

This form must be completed and returned with all appropriate documentation to receive need-based financial assistance for the **2009-2010 academic year**. All questions herein pertain to the 2009-2010 academic year.

Clarkson bases its financial aid program on two comprehensive criteria:

- 1. Financial Need:** Determined from the results of the Free Application for Federal Student Aid (FAFSA) and this Clarkson Verification Form.
- 2. Academic Achievement:** Academic achievement is outlined on your 2009-2010 Financial Aid Notification (FAN) letter.

Before turning this form into SAS, make sure you:

- ✓ **Include and *sign* all 2008 Federal Income Tax Returns (IRS 1040/1040A/1040EZ)**
(also include schedule C or F if you have self-employed income)
- ✓ **Include copies of all W-2s**
(please do not overlay on tax returns when copying)
- ✓ **Leave nothing blank**
- ✓ **Make and keep a copy of this form and tax returns for your records**
- ✓ **File your FAFSA via the Web or paper FAFSA (FAFSA Web address: www.fafsa.ed.gov)**
▶ **via the Web method is highly recommended**

Student Information

- Check here if a parent or guardian was a member of the Armed Forces who died as a result of performing military service in Iraq or Afghanistan after September 11, 2001.

Will you have your first bachelor's degree before July 1, 2009? Yes No

Indicate what level student you will be during the 2009-10 academic year: Graduate Student Undergraduate

- **If you will be a graduate student during the 2009-10 academic year, or were born before 1/1/86, or can answer "Yes" to any one of questions 48-60 on your FAFSA, you are an Independent Student — proceed to Independent Student Family Information.**

DEPENDENT STUDENT — FAMILY INFORMATION

Custodial Parent(s)

Mother/Stepmother _____ Occupation _____ Employer _____

Father/Stepfather _____ Occupation _____ Employer _____

List the people your parent(s) will support between July 1, 2009, and June 30, 2010. **Include:**

- yourself
- your custodial parent(s)
- your custodial parent(s) dependent children (if your parent(s) provide more than half support, or if they would be required to give parental information when applying for Federal student aid)

Include other people as part of your family only if:

- they lived with your parent(s) and got more than half their support from your parent(s) at the time you completed your student aid application **and**
- they will continue to get more than half their support from them from July 1, 2009, through June 30, 2010.

FULL NAME	YEAR BORN	RELATIONSHIP	If applicable, COLLEGE SIBLING ATTENDING IN '09-'10 (list only if attending at least half time)
You (the student)		self	Clarkson University

Total: include yourself, your custodial parent(s) and siblings your parent(s) support

Total of family members in college, including yourself (do not include parents in college)

INDEPENDENT STUDENT — FAMILY INFORMATION

Independent Students — *You are considered an Independent Student only if you meet the federal criteria as outlined on the FAFSA.*

List the people that you (and your spouse) will support between July 1, 2009, and June 30, 2010. **Include:**

- yourself
- your spouse
- your dependent children (if you provide more than half of their support)

Include other people as part of your family only if:

- they lived with you and got more than half their support from you (or your spouse) at the time you completed your FAFSA **and**
- they will continue to get more than half their support from you from July 1, 2009, through June 30, 2010.

FULL NAME	YEAR BORN	RELATIONSHIP	If applicable, COLLEGE ATTENDING IN '09-'10 (at least half time)
You (the student)		self	Clarkson University

Total number of family members, including yourself Total number of family members in college, including yourself

Please mail this form and all required documentation by July 1, 2009, to:

**Student Administrative Services
Clarkson University
PO Box 5615
Potsdam NY 13699-5615**

**Phone 315-268-6413
Fax 315-268-6452**

