

**2021-2022**

## REQUEST CLARIFICATION OF STUDENT FINANCIAL INFORMATION

Student Name \_\_\_\_\_ ID # \_\_\_\_\_

Please complete only the section(s) indicated in the correspondence you received:

STUDENT ASSET INFORMATION	
As of the day you filed the FAFSA, what was your (and spouse's) total current balance of cash, savings and checking accounts?	\$
As of the day you filed the FAFSA, what was the net worth (current value minus debt) of your (and spouse's) investments? Don't include the home you live in or retirement plans and pension funds.	\$
As of the day you filed the FAFSA, what was the net worth of your (and spouse's) current businesses and/or investment farms?	\$

STUDENT INCOME INFORMATION (CALENDAR YEAR 2019)	
Adjusted gross income from IRS form 1040 - line 8b	\$
U.S. income tax paid from IRS form 1040 - line 13 minus Schedule 2 - line 2	\$
Student income from work (wages, salaries, tips, etc. in 2019)	\$
Spouse's income from work (wages, salaries, tips, etc. in 2019)	\$

STUDENT ADDITIONAL FINANCIAL INFORMATION (CALENDAR YEAR 2019)	
a. Education credits (American Opportunity and Lifetime Learning tax credit) from IRS Form 1040 Schedule 3 - line 3.	\$
b. Child support paid because of divorce or separation or as a result of a legal requirement. Don't include support for children in your household, as reported in question 93 of the FAFSA.	\$
c. Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$
d. Student grant and scholarships aid reported to the IRS in your adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$
e. Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Combat pay is reported on the W-2 in Box 12, Code Q.	\$
f. Earnings from work under a cooperative education program offered by a college.	\$

Student Name \_\_\_\_\_ ID # \_\_\_\_\_

<b>STUDENT UNTAXED INCOME INFORMATION (CALENDAR YEAR 2019)</b>	
a. Payments to tax-deferred pensions and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d codes D, E, F, G, H, and S. Don't include amounts reported in code DD (employer contributions toward employee health benefits).	\$
b. IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS form 1040 schedule 1- total of lines 15 + 19.	\$
c. Child support received for all children. Don't include foster or adoption payments.	\$
d. Tax exempt interest income from IRS Form 1040 - line 2a.	\$
e. Untaxed portions of IRA distributions and pensions from IRS Form 1040 - lines (4a +4c) minus lines (4b + 4d). Exclude rollovers. If negative, enter a zero here.	\$
f. Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of basic military allowance for housing.	\$
g. Veterans non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$
h. Other untaxed income not reported, such as worker's compensation, disability, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040 Schedule 1-line 12. Don't 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.	\$
i. Money received, or paid on your behalf (e.g., bills) not reported elsewhere on this form. This includes money that you received from a parent or other person whose financial information is not reported on this form and that is not part of a legal child support agreement.	\$

*BY SIGNING THIS WORKSHEET, I CERTIFY THE INFORMATION REPORTED IS TRUE AND ACCURATE. I UNDERSTAND IF THIS FORM IS INCOMPLETE OR RETURNED LATE, MY FINANCIAL AID WILL BE DELAYED AND A REDUCTION IN AID COULD OCCUR.*

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

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