



2025-26 Verification of Additional Financial Information – Parent

Student's First Name		WSU Access ID	
Student's Last Name		Phone Number	

Please complete and submit this form to the Office of Student Financial Aid **within 14 business days.**

This form is required to resolve conflicting information reported when you filed your 2025-26 FAFSA.

If you do not fill in an amount, we will assume zero.


Additional Financial Information	PARENT(S) 2023 amount (DEPENDENT Student only)
Education Credits (American Opportunity Tax Credit and Lifetime Learning Tax Credit). Reported on IRS Form 1040 Schedule 3, line 3.	\$
Child Support paid. DO NOT include support for children reported in your household on the FAFSA. Only report if paid because of divorce or separation or of a legal requirement.	\$
Taxable earnings from need-based employment programs. Enter any income earned as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$
Taxable college grant and scholarship aid. Only include if reported to the IRS in your adjusted gross income (AGI). Includes AmeriCorps benefits and grant/scholarship portions of fellowships and assistantships.	\$
Combat Pay or Special Combat Pay. DO NOT include untaxed combat pay. Only enter the amount that was taxable and included in your adjusted gross income (AGI).	\$
Earnings from work under a cooperative education program offered by a college/university.	\$

If you do not fill in an amount, we will assume zero.

Untaxed Income Information	PARENT(S) 2023 amount (DEPENDENT Student only)
<p>Child Support Received.</p> <p>List the actual amount of any child support received in 2023 for the children in your household.</p> <p>DO NOT include foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.</p>	\$
<p>Housing, food, and other living allowances paid to members of the military, clergy, and others.</p> <p>Include cash payments and/or the cash value of benefits received. Do not include the value of on-base military housing or the value of a basic military allowance for housing.</p>	\$
<p>Veterans' non-education benefits.</p> <p>List the total amount of veterans non-education benefits received in the tax year. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.</p> <p>DO NOT include federal veterans' educational benefits such as: Post-9/11 GI Bill, Montgomery GI Bill, Dependents Education Assistance Program, and VEAP Benefits.</p>	\$
<p>Other untaxed income or non-reported money.</p> <p>List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Schedule 1, line 12, Railroad Retirement Benefits, etc.</p> <p>DO NOT include any items reported or excluded above. In addition, do not include student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.</p>	\$

If we have questions about any of the above, additional documentation may be requested.

REQUIRED SIGNATURE: I certify that all information reported is complete and correct. I understand that changes in my FAFSA financial information based on the documentation provided may result in a change in financial aid eligibility.

 _____

Parent's Signature (Only one parent signature is required - signature must be handwritten with ink or stylus) **Date**