



This form must be completed by all Independent Undergraduate & Graduate Federal Aid Recipients who are selected for a process known as Verification. All sections of this form must be completed and returned to the Peabody Financial Aid Office.

Student Name: _____ Date of Birth: ____/____/____

Academic Level (circle one): GRAD UGRAD E-mail: _____

STUDENT & SPOUSE TAX FILING AND INCOME STATUS

Check only one:

- I (we) have or will file a 2008 Federal Tax Return and will submit a signed copy, all pages, schedules and W-2 forms
- I (we) certify that I will not file a federal tax return for 2008. I have listed below the amounts and sources of all income received for 2008 (do NOT include Federal Work-Study earnings). Attach W-2 forms if available:

| Student's Income | Name | Amount |
|------------------|------|-----------|
| Employer(s) | | \$ |
| Other Income | | \$ |
| TOTAL: | | \$ |

Student and Spouse Untaxed Income: List the source and amount of any untaxed income that you or your spouse received

| Source | Amount | |
|--|--------|-----------|
| Tax deferred pension and savings plan contributions and/or untaxed distributions | \$ | |
| Child support received for all children | \$ | |
| Tax exempt interest income | \$ | |
| Housing, Food or other living allowances | \$ | |
| Veterans noneducation benefits | \$ | |
| Other untaxed income (Source: _____) | \$ | |
| TOTAL: | | \$ |

Student and Spouse Additional Financial Information:

| Source | Amount | |
|---|--------|-----------|
| Taxable earnings from need-based employment programs such as Federal Work-Study and need-based employment portions of fellowships and assistantships. | \$ | |
| Grant and scholarship aid reported to the IRS in your adjusted gross income | \$ | |
| TOTAL: | | \$ |

List the people who will be supported by you and your spouse between July 1, 2009 and June 30, 2010. Include yourself, your spouse and your children if they will receive more than half-of their support from you. **If any of your family members will attend college on at least a half time basis between July 1, 2009 and June 30, 2010, indicate the name of the college.** If more space is required, continue on back of form.

| Full name of family member | Age | Educational Information 2009-2010 | | |
|----------------------------|-----|-----------------------------------|---------------------------|---------------------------|
| | | Relationship to you | Year in school or college | Name of school or college |
| | | | | |
| | | | | |
| | | | | |

Authorizations (please check):

- If I am a recipient of federal financial aid funds, I authorize the crediting of these awards directly to my student account to cover any educational costs. If my student account has a credit balance, I authorize Peabody to retain this balance to apply toward the next semester's expenses.
- If my student account has a credit balance, I understand that I may request a refund online at <http://www.peabody.jhu.edu/data/10/link/2881/pyrefund.pdf>. All monies received in a refund must be used for educational expenses.
- The Financial Aid Office has my permission to release personal information, including grades, required by external and internal scholarship donors.
- I understand I must reapply for financial aid each year, and that it is my responsibility to obtain materials and adhere to the deadlines set by the Financial Aid Office.
- Each person signing this form certifies that all of the information is complete and correct

Student's Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

Mail or FAX to: Peabody Office of Financial Aid
1 E. Mount Vernon Place / Leakin Hall
Baltimore, MD 21202
FAX 410-659-8102