Normandale Community College

Return to: Financial Aid and Scholarship Office
Normandale Community College
9700 France Avenue South
Bloomington, MN 55431

2009-2010 UNTAXED INCOME VERIFICATION WORKSHEET

Print Your Name: _____ **SSN:** _____
Last Name First Name

Normandale Student ID: _____

Please list the total amount of each of the untaxed income and benefits listed below that you and your spouse and/or parents received during 2008. Even though you may have few of these items, check carefully. **DO NOT LEAVE ANY BOX BLANK. IF THE ANSWER IS ZERO, ENTER $0.**

Student (and spouse)	**Calendar Year 2008** All figures reported below should be the total received for the 12 months of 2008	**Parent(s)**
$	Payments to tax deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, ***amounts reported on the W2 Form in Boxes 12a through 12d, codes D, E, F, G, H and S.***	$
$	Child support **received** for all children. Don't include foster care or adoption payments.	$
$	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits)	$
$	Veteran's non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances	$
$	Any other untaxed income or benefits not reported elsewhere, such as worker's compensation, disability, etc. **Don't include** student aid, earned income credit, child tax credit, welfare benefits, untaxed Social Security benefits, Workforce Investment Act educational benefits, combat pay (if you are not a tax filer), or benefits from flexible spending arrangements, e.g., cafeteria plans.	$
$	Money **received**, or paid on your behalf (for rent, bills, food, etc.), not reported elsewhere on this form	$ XXXXXXXXXXXX
$	←12 Month TOTAL 12 Month TOTAL→	$

By signing this worksheet, I certify that all of the information reported above is complete and correct. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail or both.

_____ _____
Your Signature (student) Date Parent's Signature Date

NCC is an affirmative action, equal opportunity educator/employer.
www.normandale.edu/financialaid
Telephone 952/487-8250 TTY 952/487-7032 Email finaid@normandale.edu

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