

## Financial Aid Office

Hampton, VA Campus: Griffin Hall, Room 214 ◆ Historic Triangle Campus (Williamsburg), Room 117A

## 2023-2024 Income Level Verification for 2021

The U.S. Department of Education selected your 2023-2024 FAFSA for review. You or your parent(s) reported zero income on the FAFSA for 2021. You are required to complete this form for review of any untaxed income that may have been used to support you or your parent's household. Review the instructions below, complete the form accordingly, and submit to the Financial Aid Office along with other required documentation.

Student ID - REQUIRED

MI

Last Name

First Name

В.

| I, the student, was <b>not</b> required to provide |  |  |  |  |
|--|--|--|--|--|
|  | parental information on the 2023-2024 FAFSA.   |  |  |  |
| ne The answers on thi                              | The answers on this form reflect information   |  |  |  |
| from me and/or my spouse, if married.              |  |  |  |  |
|  |  |  |  |  |
| Applicable where a response is rec                 | nuested or enter 0 (zero) in an  |  |  |  |
| Applicable Wilere a response is rec                | quested or enter o (zero) in an  |  |  |  |
| amount   |  |  |  |  |
| <del>amoune</del> .                                |  |  |  |  |
| <b>022:</b> Please select any of the hene          | fits listed helow or list any  |  |  |  |
| •  | nes listed below of list diff  |  |  |  |
| Name of Recipient                                  | Amount Received  |  |  |  |
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|  | T  |  |  |  |
| Name of Recipient                                  | Amount Received  |  |  |  |
| •  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | parental information The answers on this from me and/or me Applicable where a response is recommodate.  O22: Please select any of the benefit ehold received.  Name of Recipient |  |  |  |

Payments to tax-deferred pension and retirement savings: List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans (e.g., 401(k) or 403(b) plans), including, but not limited to,

**Total Amount Paid in 2020** 

amounts reported on W-2 forms in Boxes 12a through 12d with codes D, E, F, G, H, and S.

Name of Person who made the payment

| Name of Adult Who Received the<br>Support  |  | Name of Child for Whom<br>Support Was Received   |                        | Amount of Child Support<br>Received in 2021   |  |
|--|--|--|------------------------|---|--|
|  |  |  |                        |   |  |
| ayments and/or the cash val  | ue of benef  | its received.  |                        | ary, clergy, and others: Include c  |  |
| Name of Recipient  |  | ype of Benefit Received  |                        | mount of Benefit Received in 202  |  |
|  |  |  |                        |   |  |
|  |  |  |                        |   |  |
| st the total amount of vetera<br>ependency and Indemnity Co<br>o not include federal vetera  | ans non-edu<br>ompensations<br>ons educations                                    | on (DIC), and/or VA Educat<br>onal benefits such as: Mor<br>t-9/11 GI Bill   | onal W<br><b>tgome</b> | ery GI Bill, Dependents Education   |  |
| st the total amount of vetera<br>ependency and Indemnity Co<br>o not include federal vetera  | ompensations educations educations educations educations educations enefits, Pos | on (DIC), and/or VA Educat<br>Onal benefits such as: Mor   | onal W<br><b>tgome</b> | Vork-Study allowance.   |  |
| st the total amount of veteral<br>ependency and Indemnity Co<br>no not include federal veteral<br>ssistance Program, VEAP Be   | ompensations educations educations educations educations educations enefits, Pos | on (DIC), and/or VA Educat<br>onal benefits such as: Mor<br>t-9/11 GI Bill<br>Type of Veterans Nor   | onal W<br><b>tgome</b> | Vork-Study allowance.  Pary GI Bill, Dependents Education  Amount of Benefit                  |  |
| st the total amount of veteral<br>ependency and Indemnity Co<br>no not include federal veteral<br>ssistance Program, VEAP Be   | ompensations educations educations educations educations educations enefits, Pos | on (DIC), and/or VA Educat<br>onal benefits such as: Mor<br>t-9/11 GI Bill<br>Type of Veterans Nor   | onal W<br><b>tgome</b> | Vork-Study allowance.  Pary GI Bill, Dependents Education  Amount of Benefit                  |  |
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| Name of Recipien  Other untaxed income:  ist the amount of other unta  Include untaxed income such   | xed income   | on (DIC), and/or VA Educational benefits such as: Moret-9/11 GI Bill  Type of Veterans Noreducation Benefit  enot reported and not excus workers' compensation,  | onal W<br>tgome        | Vork-Study allowance.  Ary GI Bill, Dependents Education  Amount of Benefit  Received in 2021 |  |
| Name of Recipien  State the total amount of veteral sependency and Indemnity Color not include federal veteral assistance Program, VEAP Be  Name of Recipien  Other untaxed income:  ist the amount of other untaxed income not earned from word 1040 Schedule 1—line 13.  Do not include: any items repostudent aid, earned income cresupplemental Security Income, | xed income th as: such of chick. Also included workforce I combat pay            | enot reported and not except the untaxed portions of the untaxed portions of the untaxed portions of the unitaxed portions of the unitaxed portions of the unitaxed portion and the unitaxed portions of the unitaxed portion of the unitaxed | uded edisabilif healt  | Amount of Benefit Received in 2021  elsewhere on this form.                                   |  |

C.

D.

E.

F.

|  | Student ID  |  |
|--|---|--|
| elsewhere on this form. Enter the tota<br>a parent whose information was not<br>parent whose information was report<br>gives cash, gift cards, etc., include the<br>parent whose information is reported | e student's behalf (e.g., payment of student's be<br>all amount of cash support the student received<br>reported on the student's 2023-2024 FAFSA. Led. For example, if someone is paying rent, util<br>amount of that person's contributions unless to<br>on the student's 2023-2024 FAFSA. Amounts patted | in 2021. Include support from a 20 not include support from a 20 not include support from a 21 the student of the person is the student's baid on the student's behalf |
| Purpose: e.g., Cash, Rent, Books   | Amount Received by student in 2021  | Source   |
| SAMPLE Cell Phone Bill   | \$600.00  | Father   |
| below about any other financial suppospace is needed, provide a separate p   | tudent's family's financial situation, please pro-<br>ort that was received for 2021 that has not alre<br>age with the student's name and ID number at<br>f financial support for 2021 not reported in an   | ady been listed. If more<br>the top.   |
|  |   |  |
| ere is complete and correct. The st  | son signing this form certifies that all<br>udent must sign and date below. If the<br>or Federal Student Aid, then the parent s   | student is a dependent   |
| ere is complete and correct. The st<br>student for the purpose of applying fo  | udent must sign and date below. If the  | student is a dependent   |

Upload this form by logging into the <a href="http://mysupport.vpcc.edu/">http://mysupport.vpcc.edu/</a> using your MyVPCC login information, fax to (757)825-3537, or bring in person (Hampton Campus, Griffin Hall, room 214 / Historic Triangle campus, room 117A).