

Lake Superior State University

Office of Financial Aid • 650 W. Easterday Ave • Sault Ste. Marie, Michigan 49783
Fax: (906) 635-6669

UNTAXED INCOME VERIFICATION

AS NOTED ON FAFSA ON WORKSHEET "A"

2007-2008

Student Name: _____

Student ID: _____

The untaxed income reported on your FAFSA must be verified. Please identify the amount received for 2006 for each item below (if none, enter "0").

(Student)		(Parent)
\$_____	Earned Income Credit from IRS Form 1040.	\$_____
\$_____	Additional child tax credit IRS Form 1040.	\$_____
\$_____	Welfare benefits, including TANF.	\$_____
\$_____	SOCIAL SECURITY BENEFITS received, untaxed.	\$_____

TO CERTIFY STATEMENT, PLEASE SIGN, DATE & RETURN.

Signature (Parent) _____

Signature (Student) _____

Date _____

RETURN FORM TO:

**Lake Superior State University
Financial Aid Office
650 West Easterday Avenue
Sault Ste. Marie, MI 49783-1699
Fax: (906) 635-6669**