

# Harvard Division of Continuing Education

Student Financial Services 51 Brattle Street Cambridge, Massachusetts 02138-3722 (617) 495-4293 studentfinance@extension.harvard.edu

ATURENT

# 2025-26 Verification Worksheet: Dependent Student Untaxed Income

Your 2025-26 Free Application for Federal Student Aid (FAFSA) has been selected by the US Department of Education for review in a process called Verification. We are therefore required to confirm certain information you reported on the FAFSA. We will compare your FAFSA with the information you provide below. If there are differences, we will update your FAFSA accordingly. We may ask for additional information. If you have questions about the Verification process, please don't hesitate to contact our office.

## A. Student Information (for institutional identification purposes)

STUDENT LEGAL NAME (exactly as printed on your government-issued photo ID)			
Last/Family/Sur name(s)	First/Given name(s)	Middle name(s)	
DCE ID NUMBER (if known)	LAST 4 DIGITS OF SOCIAL SECURITY NUMBER	DATE OF BIRTH example: JAN 01 1994	
@	X X X - X X -		
See extension.harvard.edu/login if unsure		Month (MMM) Day (DD) Year (YYYY)	

# B. 2023 Untaxed Income

If any item does not apply, enter "N/A" for Not Applicable where a *response* is requested, or enter 0 in an area where an *amount* is requested.

enter o in an area where an <i>umount</i> is requested.	STUDENT	PARENT
<b>Payments to tax-deferred pension and retirement savings.</b> 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, amounts reported on W-2 forms in Boxes 12a through 12d with codes D, E, F, G, H, and S.	\$	\$
<b>Child support received.</b> List the actual amount of any child support received in 2023 for the children in your household. <b>Do not include</b> foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.	\$	\$
Housing, food, and other living allowances paid to members of the military, clergy, and others. Include cash payments and/or the cash value of benefits received. <b>Do not include</b> the value of on-base military housing or the value of a basic military allowance for housing.	\$	\$
Veterans non-education benefits. The total amount of veterans non-education benefits received in 2023. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances. Do not include federal veterans educational benefits such as: Post-9/11 GI Bill, Montgomery GI Bill, Dependents Education Assistance Pro-gram, VEAP Benefits	\$	\$

Other untaxed income.	TYPE OF OTHER UNTAXED INCOME:		
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		\$	\$
1Line 13, Railroad Retirement Benefits, etc.		NP	4
Do not include any items reported or excluded			
in above. In addition, do not include student aid,		đ	dh.
Earned Income Credit, Additional Child Tax Credit,		Ф	Ф
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.		۳۲ ۱	۲۲ 

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#### 2025-26 Verification Worksheet: Dependent Student Untaxed Income (continued)

STUDENT LEGAL NAME (exactly as printed on your government-issued photo ID)			
Last/Family/Sur name(s)	First/Given name(s)	Middle name(s)	

### B. 2023 Untaxed Income (continued)

Money received or paid on the student's	TYPE OF OTHER UNTAXED INCOME	STUDENT	PARENT
behalf.			
List any money received or paid on the student's behalf		\$	\$
(e.g., payment of student's bills) and not reported			
elsewhere on this form. Enter the total amount of cash			
support the student received in 2023. Include support		\$	\$
from a parent whose information was not reported on		*	**
the student's 2025-26 FAFSA, but do not include			
support from a parent whose information was reported.		<i>e</i>	e
For example, if someone is paying rent, utility bills,		⊅	⊅
etc., for the student or gives cash, gift cards, etc., include			
the amount of that person's contributions unless the			
person is the student's parent whose information is		\$	\$
reported on the student's 2025-2026 FAFSA. Amounts			
paid on the student's behalf also include any			
distributions to the student from a 529 plan <i>owned by</i>			
someone other than the student or the student's parents,		¢	e
such as grandparents, aunts, and uncles of the student.		₽	Φ

### C. Student/Parent Signatures

By signing this worksheet, we certify that all of the information reported above is complete and correct. At least one parent must sign.

Student's signature	Date
Parent's name (please print)	
Parent's signature	Date

Please upload any documents securely by logging into your account via MyDCE Portal at https://web.dce.harvard.edu/mydce-extension. From the home page, choose "Document Uploader." In the Document Upload Form, select "Financial Aid Documents" in the "Documents" field. Click "Attachments" then the "Upload Files" button/bar to select your file(s) to upload. Click the "Submit" button.