

## VERIFICATION FORM 2023-2024

Instructions: Select your group and complete the information required.

V1 |  Independent Status |  Professional Judgment |  Emancipation

### A. GENERAL INFORMATION

Student

(First Last Name)                      (Second Last Name)                      (Name)                      (Middle Initial)

Banner® ID

Social Security

Date of Birth  /  /  | Telephone  Cell Phone

(mm)      (dd)                      (yyyy)

Mailing Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Dependency Status                      Indicate if you are a:  dependent or an  independent student.

Housing                      While studying at Pontifical Catholic University of Puerto Rico, I will live:  
 With parents/relatives                       On Campus PCUPR  
 On own house/private lodging

### B. FAMILY COMPOSITION

Provide the requested information for each member of your family group who currently live in the household and who are also financially dependent (of more than 50%) of the family income during the 2023-2024 year.

Full name	Age	Relationship (to student)	Postsecondary Institution (Does not apply to parents).	Enrolled, at least, half time?	
		* Applicant	PCUPR	<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No

### C. INCOME RECEIVED DURING 2021.

- By the dependent (not the parents)**
- I filed a Federal and/or a Puerto Rico Income Tax Return<sup>1</sup>.
- I did not file, nor am I required to file, a Federal and/or a Puerto Rico Income Tax Return\*.
- \* If you worked and did not file income tax returns, please complete the following information:

Employer Name	Amount received on 2021.	Did you received a W2 or an equivalent?	
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Total amount received:		\$	

<sup>1</sup>Present copy of the Puerto Rico Income Tax Return (2021) and/or a copy of the IRS Income Tax Return or IRS Income Tax Return Transcript (2021).

**By the parents of a dependent student (not by the student)**

- I filed a Federal and/or a Puerto Rico Income Tax Return<sup>2</sup>.  
 I did not file, nor am I required to file, a Federal and/or a Puerto Rico Income Tax Return\*.

\* If you worked and did not file income tax returns, please complete the following information:

Employer Name	Amount received on 2021.	Did you received a W2 or an equivalent?	
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Total amount received:		\$	

**By the independent student and spouse**

- I filed a Federal and/or a Puerto Rico Income Tax Return<sup>2</sup>.  
 I did not file, nor am I required to file, a Federal and/or a Puerto Rico Income Tax Return\*.

\* If you worked and did not file income tax returns, please complete the following information:

Employer Name	Amount received on 2021.	Did you received a W2 or an equivalent?	
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Total amount received:		\$	

**D. CERTIFICATION**

Read, carefully, and sign:

- I CERTIFY that, to the best of my knowledge, the information provided on this form is complete and correct.
- I UNDERSTAND that, if I provide false misleading information in order to received financial aid, I may be fined, sentenced to prison, or both.
- I am the person who signs this document and I understand that the federal aid that I could receive at the **Pontifical Catholic Univesity of Puerto Rico** is for the purpose of paying my study costs at the institution for the 2023-2024 academic year.
- I authorize the **Financial Aid Office** of the **PCUPR**, as agent in the administration of federal and state funds, to obtain, if necessary, a copy of the Puerto Rico Income Tax Return filed by me to the Puerto Rico Treasury Department, a copy of the IRS Income Tax Return, or any additional information or document, for the corresponding year.

Student's Signature

Date

Parent's Signature

Date

<sup>2</sup>Present copy of the Puerto Rico Income Tax Return (2021) and/or a copy of the IRS Income Tax Return or IRS Income Tax Return Transcript (2021).