

*University of the Pacific*  
*Arthur A. Dugoni School of Dentistry*

**2019-2020 Verification Worksheet**  
**HPSL**

The Financial Aid Office verifies all applicants who want to be considered for HPSL. We will be comparing information from your application with signed copies of your (and your spouse's, if you are married) and your parent(s)' 2017 Federal tax forms, or with W-2 forms or other financial documents.

*What you should do*

Submit this completed worksheet along with signed tax forms, and any other documents to the Financial Aid Office. We will compare information on this worksheet and any other supporting documents with the information you submitted on your application.

**A. Student Information**

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Last name	First name	M.I.	Student ID# (98#####)
Address (include apt. no)			Date of Birth
City	State	ZIP code	Phone number (include area code)

**B. Family Information**

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List the people in your parents' household, include:

- yourself, your spouse & children (if applicable), your parent(s), and
- your parents' other children, even if they don't live with your parent(s), if (a) your parents will provide more than half of their support from July 1, 2018 through June 30, 2019, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
- other people if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2018 through June 30, 2019.

Write the names of all household members in the space(s) below. Also write in the name of the college for any household member, excluding your parent(s), who will be attending college at least half time between July 1, 2018 and June 30, 2019, and will be enrolled in a degree, diploma, or certificate program.

Full Name	Age	Relationship	College
_____	---	SELF	University of the Pacific-Dental
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**C. Student's (and spouse's if have one) Tax Forms and Income Information**

1. Check one of the boxes below. Tax returns include the 2017 IRS Forms 1040, 1040A, 1040EZ, TeleFile Tax Record, a tax return from Puerto Rico or a foreign income tax return. If you did not keep a copy of your tax return, request a copy from your tax preparer or a copy of an IRS form that lists tax account information.

- Check and attach if you and your spouse filed a joint return.
- Check and attach spouse's signed tax return if your spouse filed a separate tax return.
- Check if you will not file and are not required to file a 2017 U.S. Income Tax Return.

2. Funds received for child support and other untaxed income.

Sources of Untaxed Income	2017 Amount	Sources of Untaxed Income	2017 Amount
Child Support	\$	Other:	\$
Social Security (non-taxed)	\$	Other:	\$
Welfare (including TANF)	\$	Other:	\$

3. If you did not file and are not required to file a 2017 Federal income tax return, list below your (and/or your spouse's) employer(s) and any income received in 2017 (use the W-2 form or other earnings statements if available).

Sources	2017 Amount
	\$
	\$
	\$

**D. Parent(s)' Tax Forms and Income Information**

1. Check only one box below.

- Check and attach signed parents' Tax return.
- Check if your parent(s) will not and is not required to file a 2017 Income tax return.

2. Funds received for child support and other untaxed income.

Sources of Untaxed Income	2017 Amount	Sources of Untaxed Income	2017 Amount
Child Support	\$	Other:	\$
Social Security (non-taxed)	\$	Other:	\$
Welfare (including TANF)	\$	Other:	\$

3. If your parent(s) did not file and is/are not required to file a 2017 Federal income tax return, list below your parent(s) employer(s) and any income received in 2017 (use the W-2 form or other earnings statements if available).

Sources	2017 Amount
	\$
	\$
	\$

**E. Sign this Worksheet**

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

**WARNING:** if you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

\_\_\_\_\_  
Student Date

\_\_\_\_\_  
Parent Date

Please return form:  
Via email: sf\_finaid@pacific.edu  
Fax 415.749.3363