

STUDENT LAST NAME:	STUDENT FIRST NAME:	AU ID#:
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## Independent Student: 2020 Income Information

**INSTRUCTIONS:**

You, the student (**and spouse if applicable**), must check the box that is applicable to your 2020 federal tax filing status. The best way to verify tax information is by using the *IRS Data Retrieval Tool (IRS DRT)* that is part of *FAFSA on the Web* at [studentaid.gov/h/apply-for-aid/fafsa](http://studentaid.gov/h/apply-for-aid/fafsa). Notify the financial aid office if you and your spouse filed separate federal tax returns for 2020 or had a change in marital status after the end of the 2020 tax year (December 31, 2020).

**CHECK THE BOX THAT APPLIES:**

- Did you, the student (and spouse, if applicable), work in 2020?
  - Yes – Continue to question 2
  - No – I did not work or earn any wages from employment and neither did my spouse (if applicable) – **(DO NOT answer questions 2 or 3)** - Continue to the Certification and Signatures section at the bottom of this form
- Did you, the student (and spouse, if applicable), file a 2020 Federal Income Tax Return?
  - Yes – Continue to question 3
  - No – **(DO NOT answer question 3)** – Continue to the Student’s Employment Information and Certification and Signatures sections
- Did you, the student (and spouse, if applicable), use the Data Retrieval Tool (DRT) in *FAFSA on the Web* to transfer 2020 tax return information into your FAFSA?
  - Yes – Continue to Certification and Signature section
  - No – I will submit a signed copy of my 2020 Federal Income Tax Return, all 2020 W-2s, AND all applicable schedules. If you filed a separate return from your spouse (if applicable), you will also need to submit a signed copy of their 2020 Federal Income Tax Return, all 2020 W-2s, AND all applicable schedules. Continue to Certification and Signature section.

**STUDENT’S EMPLOYMENT INFORMATION:**

NAME OF WAGE EARNER	EMPLOYER’S NAME	2020 AMOUNT EARNED	W-2, 1099-R, SCHEDULE C PROVIDED
<i>John Smith (EXAMPLE)</i>	<i>Suzy’s Auto Body (EXAMPLE)</i>	<i>\$2,000.00</i>	<input checked="" type="checkbox"/> YES (ATTACHED)
			<input type="checkbox"/> YES (ATTACHED)
			<input type="checkbox"/> YES (ATTACHED)
			<input type="checkbox"/> YES (ATTACHED)
			<input type="checkbox"/> YES (ATTACHED)
<b>TOTAL AMOUNT OF INCOME EARNED FROM WORK IN 2020:</b>		<b>\$</b>	

*If more space is needed, provide a separate page that includes the student’s name and ID number at the top.*

## Certification and Signatures

Each person signing this worksheet certifies that all of the information on it is complete and correct. Electronic corrections to your FAFSA may be made by our office if there are any discrepancies between the information on this form and the data you filed on your FAFSA. The student must sign and date this form.

<p><b>WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.</b></p>	STUDENT SIGNATURE:	DATE:
	SPOUSE SIGNATURE (OPTIONAL):	DATE:

You may submit this document and any additional requested documentation to the Office of Student Financial Services in person, by fax (516-877-3380), or mail (Adelphi University, Levermore Hall Lower Level – Rm 1, 1 South Avenue, P.O. Box 701, Garden City, NY 11530).