

UW-Superior McNair Scholars Program Income Verification Form

Applicant Name (Last, First, MI):

Instructions: Determine applicant's status; report income and household size; sign and date the form; and return it to the McNair Scholars office.

Applicant Status: What is your federal tax filing status according to your most recently filed federal taxes? Please check one either independent, dependent, or I do not file taxes.

Independent – You are Independent if **ANY** of the following conditions apply to you:

- You were 24 years of age on or before December 31st of last year;
- You have a dependent child or parent;
- You are a member or veteran of the US Armed Forces; or
- At any time since you turned 13, both of your parents were deceased, you were in foster care, or you were a dependent or ward of the court.

If **Independent**, the **Applicant** must certify and sign this form.

Income and Household Size

For the most recent tax year, I certify that the household **Taxable Income** (found on Line 6 of Form 1040EZ; Line 27 of Form 1040A; or Line 43 of Form 1040) was: \$ _____, and the number of people in the household was: _____.

Dependent – You are a Dependent if **ALL** of the following conditions apply to you:

- You were under the age of 24 on December 31st of last year;
- You do not have a dependent child;
- You are not a member or veteran of the U.S. Armed Forces; or
- At any time since you turned 13, one or both of your parents were living, you were not in foster care, nor were you a dependent or ward of the court.

If **Dependent**, the **tax filer** (parent or guardian) must certify and sign this form.

Income and Household Size

For the most recent tax year, I certify that the household **Taxable Income** (found on Line 6 of Form 1040EZ; Line 27 of Form 1040A; or Line 43 of Form 1040) was: \$ _____, and the number of people in the household was: _____.

_____ **I do not file taxes. (Please initial)**

Certification

I certify that all the information provided in the above sections is true, correct, and complete to the best of my knowledge.

Certifying Individual's Signature

Date

Please print name: _____

Relationship to applicant _____

Please return form to:

UW-Superior McNair Scholars Program
Swenson Hall 2047
Superior, WI 54800
Mgutsch1@uwsuper.edu