



Household Resources 2023-2024

Financial Aid Office
 Phone: (208) 524-3000 ext.7
 Toll Free: 1-800-662-0261
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 1600 S. 25th E. Idaho Falls, Idaho 83404

First Name	Last Name	Student ID	Last 4 SSN	Phone Number
			XXX-XX	

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The federal government requires colleges to check the accuracy of the information you provided on your FAFSA. You must complete this worksheet, sign, attach any required documents, and submit the form to the Financial Aid Office before they can establish your eligibility for assistance. If you have questions about verification, contact our Financial Aid Office

Untaxed Income Information

Your Free Application for Federal Student Aid (FAFSA) information shows that you reported unusually low income for the 2021 calendar year. The Federal Government requires colleges to check the accuracy of the information you provided on your FAFSA. You must return the information requested on this form or you will not be considered for federal financial aid.

Student/Spouse	Calendar Year 2021 Answer questions in dollar amounts. **If no amount exists mark N/A**	Parent(s) If dependent student
	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D,E,F,G,H, and S. Don't include amounts reported in code DD (employer contributions toward employee health benefits).	
	Child support you received for all children in your household. Don't include foster care, 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 (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.	
	Veterans' non-education benefits received such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	
	Other untaxed income not reported elsewhere on this form, such as workers' compensation, disability, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040—line 25.	
	Money received or paid on your behalf (e.g., bills), not reported elsewhere on this form.	
TOTAL		

****If you entered all zeroes above, then please attach a separate page explaining how you and your family supported yourself during 2021** Additional documentation may be requested.**

Certifications and Signatures

Each person signing this form certifies that all of the information reported is complete and correct. The student and one parent (if dependent student) whose information was reported on the FAFSA must sign and date.

WARNING: If you purposely provide false or misleading information, you may be subject to a fine, imprisonment, or both.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____
(If applicable-dependent students)