



**PLEASE DO NOT LEAVE ANY BLANK LINES.**  
**If a question does not apply to you, write "0".**

Questions To Be Answered	STUDENT INFORMATION	SPOUSE INFORMATION
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**SECTION D: INCOME INFORMATION**

Have you filed a 2009 Federal Income Tax return and attached a SIGNED copy with ALL the schedules and W-2s?	<input type="checkbox"/> YES, I have filed and attached the appropriate copies. <input type="checkbox"/> NO, I will not file, but did work in 2009. <input type="checkbox"/> NO, I will not file and did not work in 2009.	<input type="checkbox"/> YES, I have filed and attached the appropriate copies. <input type="checkbox"/> NO, I will not file, but did work in 2009. <input type="checkbox"/> NO, I will not file and did not work in 2009.
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*NOTE: Regardless of whether you were required to file a 2009 Federal Income Tax return or not, please list each employer and any income earned. Attach ALL W-2s and/or 1099s.*

List each employer and the amount earned during 2009. If you need additional space, please attach a sheet listing each additional employer and amount earned.	Employer	Amount	Employer	Amount
		\$		\$
	Employer	Amount	Employer	Amount
		\$		\$
	Employer	Amount	Employer	Amount
	\$		\$	
	Employer	Amount	Employer	Amount
		\$		\$
	Employer	Amount	Employer	Amount
		\$		\$

**SECTION E: UNTAXED INCOME – Total Amount Received in 2009**

Child support received?	<input type="checkbox"/> YES    Amount \$ _____ <input type="checkbox"/> NO	<input type="checkbox"/> YES    Amount \$ _____ <input type="checkbox"/> NO
List housing, food, and other living allowances received.	\$	\$
List Veteran's non-educational benefits.	\$	\$
List other sources of untaxed income. Include any workmen's compensation and untaxed pensions.	\$	\$

**SECTION F: INCOME EXCLUSIONS – Total Amount Received in 2009**

Taxable earnings from Federal Work-Study or Parry Idaho Work-Study.	\$	\$
Taxable earnings from a Cooperative Education Program.	\$	\$
<b>List all child support payments you or your spouse paid in 2009 because of divorce or separation. Do not include support for children included in your household size. If this question does not apply to you, enter zero.</b>	<b>Name of Child</b>	<b>Yearly Amount</b>
		\$
		\$
		\$

**SECTION G: SIGNATURES**

**You and your spouse must sign and date this form.** Your signatures indicate that all information provided on this form is complete and correct. Any requested documents will be provided to verify the reported amounts.

**STUDENT** Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SPOUSE** Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Spouse signature required if spouse is also attending Boise State)

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