

## 2022-2023 Verification of Combat Pay - Parent

OFFICE OF SCHOLARSHIPS AND FINANCIAL AID WARRINER HALL 202, MOUNT PLEASANT, MI 48859 PHONE: (989) 774-3674; FAX: (989) 774-3634 HTTPS://FINANCIALAIDPORTAL.APPS.CMICH.EDU VCPP 23

<u>Why have you received this form?</u> The tax filing status provided on your Free Application for Federal Student Aid (FAFSA) does not match your selected IRS tax filing status.

<u>When should this form be submitted</u>? Failure to complete and submit this form with all required documentation to the Office of Scholarships and Financial Aid within 21 business days may result in the cancellation of your federal financial aid.

Student Information		
Student Name (please print)	Campus ID Number	
Parent 1 Name (please print)	Parent 2 Name (please print)	
Parent(s) of Dependent Student Combat Pay Verification		
Combat Pay		Parent(s)
Did you or your spouse (if married) receive combat pay in 2020?		Yes No
If you or your spouse (if married) received combat pay in 2020:		Total Dollar Amount
Indicate the dollar amount of combat pay received in 2020 that was (AGI).	included in your adjusted gross income	
Enter ONLY the portion that was included in your adjusted gross in	come.	
This should be zero for enlisted persons and warrant officers (including commissioned warrant officers) because their combat pay is entirely non-taxable. For commissioned officers generally, combat pay in excess of the highest enlisted person's pay (plus imminent danger/hostile fire pay) is taxable.		\$
See <u>IRS Publication 3, Armed Forces' Tax Guide</u> , for more information	n.	
Certification and Signature		
SIGNATURE REQUIRED: I certify that the information complete to the best of my knowledge. I understand that based on t information may occur and may result in a change in financial aid eli	he documentation provided changes in my	
Parent Signature (Only one parent signature is required)	Date	_