



Return this completed form to
St. Ambrose University, Financial Aid Office
518 W. Locust Street, Davenport, IA 52803

Your FAFSA has been selected for a process called verification. In order to finalize your financial aid package, please provide us the following information within 30 days.

Student Information

Name SAU student ID# please print
Address
Date of birth Daytime phone (include area code)

2021 Untaxed Income (calendar year 2021)

1 Payments to tax-deferred pension and savings plans
2 Child support you received for all children in your household
3 Housing, food and other living allowances paid
4 Veterans' non-education benefits received
5 Other untaxed income
6 Money received or paid on your behalf
7 Pension/IRA rollover

Certification

By signing this form, I (we) certify that all the information reported is complete and correct. If you are dependent, your parent must sign. Return the form to the St. Ambrose University Financial Aid Office.

Student signature:

Date:

Parent signature:

Date:

(If dependent)