



WORCESTER
S T A T E
UNIVERSITY

Financial Aid
Phone: 508-929-8056
Fax: 508-929-8194

NAME: _____

ID#: _____

FAC21RLV

2021/2022
ROLLOVER VERIFICATION FORM

You are being asked to complete this form because you have indicated to us that a rollover retirement contribution is reported on the 2021-22 FAFSA. In order for these funds to be excluded from your expected family contribution, the Financial Aid Office will require the documents listed in Section 1 to confirm the amount of the rollover.

SECTION 1

Please remit the completed form to the Financial Aid Office with one of the following supporting documents:

1. IRS Form 1099-R (Box 7 must show code "G") **AND** IRS Form 5498 (Box 2 should show rollover amount)
2. Copy of 1040 with rollover noted on line 4

SECTION 2

UNTAXED INCOME TYPE	AMOUNT
Amount of untaxed portion of IRA, Pension, and Annuity distributions from 2019 IRS form 1040 (line 4) that was rolled over:	\$

I certify that the above information is complete and correct. Do not leave any blanks. If not complete this form will be returned to you.

SIGNATURE (student) _____ DATE: _____

SIGNATURE (parent) _____ DATE: _____