

(PSRL22) Verification of Rollover - Parent's Spouse

2024-2025

University of South Florida  
Office of Financial Aid • 4202 East Fowler Avenue, SVC 1102 • Tampa, Florida 33620-6960

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Student's Name: \_\_\_\_\_ USF ID: U \_\_\_\_\_

\_\_\_\_\_

I, \_\_\_\_\_, certify that the amount of the untaxed IRA and pension  
(Parent's Spouse Name)

for 2022 on my tax return is \$\_\_\_\_\_.

**Any alteration to this form will not be accepted. All signatures must be handwritten, or signed with DocuSign.  
Typed signatures will not be accepted.**

Parent's Spouse Printed Name: \_\_\_\_\_

Parent's Spouse Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_\_\_

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