

## 2016–2017 Verification Worksheet - *DEPENDENT STUDENT*

Your **2016–2017 Free Application for Federal Student Aid (FAFSA)** was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your parents reported on your FAFSA.

To verify that you provided correct information, the financial aid advisor at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are any discrepancies, your FAFSA information may need to be corrected. You, and at least one parent, must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid advisor at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid advisor as soon as possible so that your financial aid will not be delayed.

### STEP 1: DEPENDENT STUDENT’S INFORMATION

Student’s Last Name	Student’s First Name	Student’s M.I.	Student’s Social Security Number
Student’s Street Address (include apt. no.)			Student’s Date of Birth
City	State	Zip Code	Student’s Email Address
Student’s Home Phone Number (include area code)			Student’s Alternate or Cell Phone Number

### STEP 2: DEPENDENT STUDENT’S FAMILY INFORMATION

List below the people in your parent(s)’ household. **Include:**

- Yourself and your parent(s) (including a step-parent) even if you don’t live with your parent(s).
- Your parent(s)’ other children if your parent(s) will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the other children would be required to provide parental information if they were completing a FAFSA for 2016–2017. Include children who meet either of these standards, even if they do not live with your parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.

Include the name of the college for any household member, **excluding your parent(s)**, who will be enrolled at least half time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2016, and June 30, 2017.

- *If more space is needed, attach a separate page with the Student’s Name and Social Security Number at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>	<i>Central University</i>	<i>Yes</i>
		<i>Self</i>		

## STEP 3: DEPENDENT STUDENT'S INCOME INFORMATION TO BE VERIFIED

Check the box that applies:

- 1. Student **did not** file a 2015 individual tax return with the IRS. Student was **NOT** employed and had no income earned from work in 2015.
- 2. Student **has** filed a 2015 tax return with the IRS, and used or will use the IRS Data Retrieval Tool on the initial FAFSA or when making FAFSA corrections **OR** student did NOT use the IRS Data Retrieval Tool and will NOT make FAFSA correction, but instead WILL submit 2015 TAX TRANSCRIPT. ***Income verification must be completed by use of the IRS Data Retrieval Tool within the FAFSA (If applicable). Please attach copies of ALL W-2s***
- 3. Student was employed in 2015, but was not required to file a Federal tax return with the IRS. List below the names of all the student's employers and the amount earned from each employer in 2015. **Attach copies of all 2015 W-2 forms issued to the student by employers. List every employer even if they did not issue an IRS W-2 form.**

Employer's Name	2015 Amount Earned	IRS W-2 Attached?

***Important Note: If the student filed, or will file, an amended 2015 IRS tax return, the student must contact the financial aid advisor at the campus in order to complete this section.***

## STEP 4: PARENTAL INCOME INFORMATION TO BE VERIFIED

**Note:** If two parents were reported in Section B of this worksheet, the instructions and certifications below refer and apply to both parents.

Check the box that applies:

- 1. Parent(s) **did not** file a 2015 individual or joint tax return with the IRS. Parent(s) was **NOT** employed and had no income earned from work in 2015. ***Note: If parent(s) are married, with one parent having zero income and parent return is not filed jointly, the parent with zero income must sign a non-filing statement.***
- 2. Parent(s) **has** filed a 2015 tax return with the IRS, and used or will use the IRS Data Retrieval Tool on the initial FAFSA or when making FAFSA corrections **OR** parent(s) did NOT use the IRS Data Retrieval Tool to complete the FAFSA and will NOT make FAFSA correction, but instead WILL submit a 2015 TAX TRANSCRIPT. ***Income verification must be completed by use of the IRS Data Retrieval Tool within the FAFSA (If applicable). Please attach copies of ALL W-2s***
- 3. Parent(s) was employed in 2015, but was not required to file a Federal tax return with the IRS. List below the names of all the parent(s) employers and the amount earned from each employer in 2015. **Attach copies of all 2015 W-2 forms issued to the parent(s) by employers. List every employer even if they did not issue an IRS W-2 form**

Employer's Name	2015 Amount Earned	IRS W-2 Attached?

***Important Note: If the parent(s) filed, or will file, an amended 2015 IRS tax return, the parent(s) must contact the financial aid advisor at the campus in order to complete this section.***

**STEP 5: FOOD STAMP BENEFITS – CALENDAR YEAR 2014 and/or 2015**

Did someone in the student’s household (listed in STEP 2) received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2014 and/or 2015 calendar years?

**No** – Continue to Step 6

**Yes** –One of the persons listed in STEP 2 of this worksheet received SNAP benefits during the 2014 and/or 2015 calendar years.

**STEP 6: CHILD SUPPORT PAID – CALENDAR YEAR 2015**

Did your parent(s) pay child support in 2015?

**No** – Continue to Step 7

**Yes**, Please certify the following:

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was paid	Amount of Child Support Paid in 2015

**STEP 7: OTHER UNTAXED INCOME – CALENDAR YEAR 2015**

Please indicate in the boxes below any untaxed income you or your parent(s) received for the calendar year 2015. **If you or your parent(s) did not receive any of the following, please mark the spaces below with a ‘0’.**

**A. Payments to tax-deferred pension and retirement savings**

List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans (e.g., 401 (k) or 403 (b) plans), including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12 d with codes D, E, F, G, H, and S.

Name of Person Who Made the Payment	Total Amount Paid in 2015

**B. Child Support Received**

List the actual amount of any child support received in 2015 for the children in your household.

**Do not include** foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.

Name of Adult Who Received the Support	Name of Child For Whom Support Was Received	Amount of Child Support Received in 2015

**C. Housing, food, and other living allowance paid to members of the military, clergy, and others**

Include cash payments and/or the cash value of benefits received.  
**Do not include** the value of on-base military housing or the value of a basic military allowance for housing.

Name of Recipient	Type of Benefit Received	Amount of Benefit Received in 2015

**D. Veterans non-education benefits**

List the total amount of veterans non-education benefits received in 2015. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.  
**Do not include** federal veterans educational benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, Post-9/11 GI Bill

Name of Recipient	Type of Veterans Non-Education Benefit	Amount of Benefit Received in 2015

**E. Other untaxed income**

List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers’ compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc.  
**Do not include** any items reported or excluded in A – D above. In addition, do not include student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Name of Recipient	Type of Other Untaxed Income	Amount of Other Untaxed Income Received in 2015

**F. Money received or paid on the student’s behalf**

List any money received or paid on the student’s behalf (e.g., payment of student’s bills) and not reported elsewhere on this form. Enter the total amount of cash support the student received in 2015. Include support from a parent whose information was not reported on the student’s 2016-2017 FAFSA, but do not include support from a parent whose information was reported. For example, if someone is paying rent, utility bills, etc., for the student or gives cash, gift cards, etc., include the amount of that person’s contributions **unless the person is the student’s parent whose information is reported on the student’s 2016-2017FAFSA**. Amounts paid on the student’s behalf also include any distributions to the student from a 529 plan owned by someone other than the student or the student’s parents, such as grandparents, aunts, and uncles of the student.

Purpose: e.g., Cash, Rent, Books	Amount Received in 2015	Source

**Note:** If the income provided does not appear to provide sufficient financial support\* for the household size, the student must fill out a Low Income Form to document how the family was financially supported in 2015.

\*Sufficient financial support is defined as below the 2015 Poverty Guidelines as published by US Dept. of Health and Human Services

**STEP 8: CERTIFICATION AND SIGNATURES**

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and at least one parent must sign and date.

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

\_\_\_\_\_  
 Student’s Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent’s Signature

\_\_\_\_\_  
 Date