

2015-2016 V6 Verification Form

The Department of Education has selected your FAFSA for a review process called *verification*. In this process, the Office of Financial Aid will be comparing information from your FAFSA with this worksheet and your IRS Data. Federal regulations require colleges to ask for this information before disbursing federal aid. If there are differences between your application and the documents you provide, your FAFSA information will need to be corrected by your Financial Aid Administrator. *Please read all instructions carefully before completing this form to avoid delaying your financial aid awards.*

INSTRUCTIONS:

SECTION A:

1. Make sure to check your Missing Information Checklist on the InSite Portal.

STUDENT INFORMATION

2. Complete all required sections of this worksheet and provide all required documentation and signatures. In order to complete your financial aid file, you may be required to provide additional documentation in addition to this verification worksheet.

Last Name First Name			Stu	dent ID Number		
Address (include apt. no.)			Date of Birth			
City	State		Zip	Ph	one Number (include area code)
SECTION B:	FAMILY INFORMATIO	N				
List the peop	le in your household. Use	a separa	ite sheet of p	aper i	f there are more than 6 peop	ole in your household.
Yourself (ever Your parents' Your parents' half of their fi (even if they a Other people	ARE A <u>DEPENDENT</u> STUDE in if you are not currently living it), including stepparent. other children, <u>IF</u> your parents inancial support from 07/01/15 are not currently living with you, <u>IF</u> they now live with your parence than half of their financial 0/16.	with your p will provi through 0 ur parents) ents and yo	de more than 6/30/16 our parents	√	Your spouse, if married. Your children, <u>IF</u> you will provifinancial support from 07/01/2 Other people, <u>IF</u> they now live provide more than half of thei 07/01/15 through 06/30/16.	de more than half of their 15 through 06/30/16. with you and you will
	FULL NAME	465	RELATIONS	HIP	COLLEGE NAME	Will be Enrolled at Least
	FULL NAME	AGE	(to studer	•	(if currently enrolled)	6 units (yes or no)
1.			SELF (Stude	ent)		
2.						
3. 4.						
4. 5.						
6.						
SECTION C:	STUDENT'S/SPOUSE'S	(IF MAR	RIED) INCON	/IE INF	ORMATION (all applicants)	
PLEASE CHECK	ONE APPROPRIATE BOX BE	LOW:				
Check You a	there if the student filed ta re required to provide a cop unt transcripts are no longer	xes in 201 by of your accepted	.4 but <u>did not</u> 2014 IRS TAX as proof of ta	<i>to use</i> RETUF x filing	<u>DATA Retrieval Tool</u> in FAFSA o the IRS Data Retrieval Tool in I EN TRANSCRIPT. Please note, 10 . Only 2014 <u>IRS Tax Return Tran</u> 8-9946 to request a copy via ma	FAFSA on the Web. 040, 1040A, or 1040EZ forms scripts are accepted. Copies
are av	vailable for printing online a	t <u>www.irs</u> file and i	.gov or call 1-8 s not required	800-90 to file	8-9946 to request a copy via ma taxes in 2014. If you did not fil CATION on the next page. If the	ail. e taxes in 2014, please

anytime in 2014, please attach a copy of the all 2014 W2 forms even if the student was not required to file taxes in 2014.

SECTION D: PAR	ENT'S INCON	ME INFORMATION (for DE	PENDENT students or	ly)		
PLEASE CHECK <u>ONE</u> AF	PPROPRIATE BO	OX BELOW:				
Check here if	the student's	parent(s) filed taxes in 201	4 and <i>used the IRS DATA</i>	Retrieval	<i>Tool</i> in FAFSA or	the Web.
The student's or 1040EZ for accepted. Cop Check here if file taxes in 20 parent(s) was	parent(s) is rems or account oies are availal the student's 014, please co	parent(s) filed taxes in 2010 equired to provide a copy of a transcripts are no longer active for printing online at www.parent(s)				

SECTION G: UNTAXED INCOME

Based on the information provided on your FAFSA, it does not appear that the 2014 income reported is sufficient to provide financial support for the number of household members reported. Complete <u>ALL</u> sections below. If you were required to provide parent information on your FAFSA, answer the questions below as they apply to you and your parents and your parent must sign the form; if you were not required to provide parent information on your FAFSA, answer the questions below as they apply to yourself (and your spouse if you are married). If any item does not apply, enter N/A or \$0. DO NOT LEAVE ANY SECTION BLANK.

• Payments to tax-deferred pension and retirement savings - List any payments to plans, such as 401(k) or 403(b), including but not limited to amounts reported on W2 boxes 12a-12d codes D, E, F, G, H, and S.

	, , , , ,
Person who made the payment	Total amount paid in 2014
	\$
	\$

Housing, food and other living allowances paid to members of the military, clergy, and others – List any payments and/or
the cash value of benefits received by any family member that is military, clergy, etc. Do not include the value of on-base
housing or basic allowance for housing for military.

Person who received the benefit	Type of benefit received	Total amount received in 2014
		\$
		\$

• **Veteran non-education benefits** – Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and VA Educational Work-Study allowances.

Name of person who received benefit	Type of Veterans Non-Ed received	Total amount received in 2014
		\$
		\$

Child Support received – List the actual amount of child support received for children in your household.

Who received the support payment	Child for whom payment was made	Total amount received in 2014
		\$
		\$

• Other untaxed income – List the type and amount of other income received that has not been reported elsewhere on this form. Include payments from worker's compensation, disability, untaxed portions of health savings accounts, etc. Do not include financial aid, Earned Income Credit, Additional Child Tax Credit, TANF, Social Security Benefits, SSI, combat pay, etc.

Person who received income	Type of untaxed income received	Total amount received in 2014
		\$
		\$

• Money received or paid on the student's behalf – List any other money received or paid on the student's behalf that is not reported elsewhere on this form. For example, if someone is paying the student's rent, utilities, bills, or gives the student cash, gift cards, etc., list the total amount that person paid, unless the person is the student's parent whose information is reported on the student's FAFSA. Also include any distributions to the student from a 529 plan owned by someone other than the student or student's parents.

Name and relationship of person who gave the payment	Type of payment (cash, rent, utilities)	Total amount received in 2014
		\$
		\$

• Additional Income Information – List any other resources/benefits received by the student and any other members of the student's household. This may include veteran's education benefits, military housing, SNAP, TANF, WIC, etc.

Person who received resource/benefit	Type of resource/benefit	Total amount received in 2014	

		on here if you rec expenses.	eived low-income or free h	ousing/rent, reduced or fre	ee utilities, or utilized any other sou	irces for basic
SECTIO		SIGN THIS W				
			at all the information reported a may be fined, be sentenced t		ning: If you purposely give false or mis	leading
Student	Signatı	ıre	Date	Parent Signatu	re (for Dependent Students only)	Date

Explanation of Support – In a few sentences below, explain how your family was financially supported in 2014. You should