

2014-2015 Aggregate Verification Worksheet (V5)

What is Verification?

Your 2014-2015 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. Federal regulation states that prior to disbursing federal student aid, Asbury University must confirm the information you and your parent(s), or spouse (if married), reported on your FAFSA. To verify that accurate information was provided, the Financial Aid Office will compare your FAFSA with the information on this worksheet and with any other required documentation. If there are differences, your FAFSA information may need to be amended.

What You Should Do:

- Obtain a 2013 Federal IRS Tax Return Transcript (TRT) for yourself, your parents/stepparents, or your spouse (if married). (If you used the IRS Data Retrieval Tool to transfer your IRS income data to your FAFSA, you may not have to submit the IRS Tax Return Transcript. The Financial Aid Office will let you know if the TRT is needed.) A photocopy of your income tax return is not acceptable.
 - To obtain an IRS Tax Return Transcript, go to www.IRS.gov and click on the "Order a Return or Account Transcript" link, or call 1-800-908-9946. Make sure to request the "IRS tax return transcript" and NOT the "IRS tax account transcript." You will need your Social Security Number, date of birth, and the address on file with the IRS (normally this will be the address used when the 2013 IRS tax return was filed). It takes up to two weeks for IRS income information to be available for electronic IRS tax return filers, and up to eight weeks for paper IRS tax return filers.
- Obtain all 2013 W2s and/or 1099s for yourself, your parents/stepparents, and/or your spouse (if married).
- Complete and sign this worksheet.
 - Dependent Students Complete Sections A, B, C, D, E, and F
 - Independent Students Complete Sections A, C, D, E, and F
- Submit the completed worksheet, tax return transcripts, W2s and/or 1099s, and any other required documents to the Financial Aid Office.
- Regarding Section F of this worksheet: If you do not appear in person to a Financial Aid representative at Asbury University, be sure that you have attained the required witness of a Notary Public.
- After a financial aid representative reviews your information, you could be asked to submit additional
 documentation. When all the information has been reviewed, if any adjustments are made, you will receive
 a revised financial aid award via your Asbury email account.

Helpful Definitions:

- Dependent Student one who is <u>required</u> by federal regulations to include parents' information on the FAFSA.
- Independent Student one who is <u>not required</u> by federal regulations to include parents' information on the FAFSA.

A. STUDENT AND FAMILY INFORMATION

	1 113(1)	Name N	1.I. Social Security N	lumber
Street Address (include apt.	no.)		Date of Birth	
City	State	Zip	Code Home Phone Nu	mber (include area code)
Email Address			Alternate or Cell	Phone Number
Include other people of their support from them Independent Student: June 30, 2015. Include now live with you and re 2014 and June 30, 2015. Additionally, include the name east half time in a degree, July 1, 2014, and June 30,	List the people yourself, you eceive, and will be of the colleg diploma, or cei	that you and your set that you and your set spouse, and your continue to receive the for any household artificate program at	arental information when applyints and receive, and will continue, 2015. pouse (if married) will support I dependent children. Include more than half their support from member, excluding your parent a postsecondary educational intach a separate page with the	pe to receive, more than half between July 1, 2014 and other people only if they om you between July 1, and other, who will be enrolled anstitution any time between
				student's name and Socia
Security Number at the top. Full Name	Age	Relationship	College	Will be Enrolled at
Full Name	Age 21	Relationship Brother	College University of Montana	
<u> </u>		-		Will be Enrolled at Least Half-Time?
Full Name		Brother	University of Montana	Will be Enrolled at Least Half-Time?
Full Name		Brother	University of Montana	Will be Enrolled at Least Half-Time?
Full Name		Brother	University of Montana	Will be Enrolled at Least Half-Time?
Full Name		Brother	University of Montana	Will be Enrolled at Least Half-Time?
Full Name		Brother	University of Montana	Will be Enrolled at Least Half-Time?
Full Name Jacob Alexander (example)	21	Brother Self	University of Montana	Will be Enrolled at Least Half-Time?
Full Name Jacob Alexander (example)	ND BENEFITS	Brother Self Self INFORMATION	University of Montana	Will be Enrolled at Least Half-Time? Yes
Full Name Jacob Alexander (example) B. PARENTS - INCOME A Check the appropriate	ND BENEFITS	Brother Self Self INFORMATION d provide the reque	University of Montana Asbury University	Will be Enrolled at Least Half-Time? Yes Pents. AFSA on
Full Name Jacob Alexander (example) 3. PARENTS - INCOME A Check the appropriate Parent(s) used the IRS	ND BENEFITS box below and S Data Retrieva	Brother Self Self INFORMATION d provide the requestal Tool to transfer 20	University of Montana Asbury University ested information and docum 13 income information to the Fa	Will be Enrolled at Least Half-Time? Yes Pents. AFSA on (date)
Full Name Jacob Alexander (example) B. PARENTS - INCOME A Check the appropriate Parent(s) used the IRS	ND BENEFITS box below and S Data Retrieva	Brother Self Self INFORMATION d provide the requestal Tool to transfer 20 fer 2013 income info	University of Montana Asbury University ested information and docum 13 income information to the Farmation to the Farmation to the FAFSA using the	Will be Enrolled at Least Half-Time? Yes Pents. AFSA on (date)

Student's Name		Last Four of SSN		
Parent(s) was not employe	ed and had no income earned from	m work in 2013.		
	not required to file a 2013 federal ome received in 2013, but not repoyers are attached.			
signed copy of the original	<u>l</u> 2013 income tax return and will 2013 IRS income tax return that well U.S. Individual Income Tax Ref	was filed with the IRS, <u>AND</u> a s	igned copy of the 2013	
Employe	er's Name	2013 Amount Earned	IRS W-2 Attached?	
Sheila's Auto Body Shop (examp		\$2,000.00	Yes	
C. SNAP BENEFITS AND/OR CHILD SUPPORT PAID Complete This Section Only If Your FAFSA Indicates Receipt of SNAP Benefits and/or Child Support Paid. In 2012 or 2013, one of the family members listed in Section A of this worksheet received food stamps (SNAP) benefits. Parent, Student, and/or Spouse paid child support in 2013. The required information below has been completed in full. Name of Person Who Paid Name of Person to Whom Name of Child for Whom Amount of Support				
Child Support	Child Support was Paid	Support Was Paid	Paid in 2013	
Jordan Jones (example)	Taylor Smith	Meri Jones	\$6,000.00	
	F MARRIED) – INCOME AND BE Delow and provide the requeste RS Data Retrieval Tool to transfer	ed information and document	e FAFSA on	
	could not) transfer 2013 income i		(date) the IRS Data Retrieval	
Student/spouse will submit the IRS on				
the into on	2013 IRS Tax Return Transcript (date).	(TRT) to Asbury at a later date.	. TRT was ordered from	

Student's Name	Last Four of SSN	
Student/spouse did not and was not required to file a 2013 and amounts of any earned income received in 2013, but no 1099s issued by any and all employers are attached. Student/spouse filed an amended 2013 income tax return a transcript or signed copy of the original 2013 IRS income tax of the 2013 IRS Form 1040X, "Amended U.S. Individual Income	ot reported on a tax return. Add and will submit to the school a 2 x return that was filed with the	ditionally, W2s and/or 2013 IRS tax return IRS, <u>AND</u> a signed copy
Employer's Name	2013 Amount Earned	IRS W-2 Attached?
Sheila's Auto Body Shop (example)	\$2,000.00	Yes
E. CERTIFICATION AND SIGNATURES Each person signing this worksheet certifies that all the information reported on it is complete and correct. The student and one parent must sign and date.	WARNING: If you purposely give information on this worksheet, you sentenced to jail, or both.	
Student's Signature	Date	
Parent's Signature (required for dependent students)	Date	

Student's Nan	ne	Last Four of SSN
F. IDENTITY	AND STATEMENT OF EDUCATION	AL PURPOSE
If the student	is unable to appear in person at	(Name of Postsecondary Educational Institution)
to verify his or	her identity, the student must provide	(Name of Postsecondary Educational Institution)
•		
		identification (ID) that is acknowledged in the notary statement below, other state-issued ID, or passport; and
(b) The ori	ginal notarized Statement of Educatio	onal Purpose provided below.
	Statem	nent of Educational Purpose
	I certify that I	am the individual signing
	(Print Stud	lent's Name)
this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending		
	Thay receive will only be used for a	educational purposes and to pay the cost of attending
	(Nove of Deshare and an Education	for 2014-2015.
	(Name of Postsecondary Educ	cational institution)
	(Student's Signature)	(Date)
	(Student's Asbury ID Number)	
	Notary's C	Certificate of Acknowledgement
State of		, City/County of
On	, befo	
	(Date)	(Notary's name)
personally app	peared,	, and provided to me on basis of
	,	
satisfactory ev	vidence of identification	(Type of government-issued photo ID provided)
to be the abov	ve-named person who signed the fore	, , , ,
WITNESS my	hand and official seal	
(seal)		(Notary signature)
My commission	on expires on	(INOLATY SIGNALUTE)
-	(Date)	
		Submit this worksheet to:

Asbury University, Financial Aid Office One Macklem Drive Wilmore, KY 40390

You should make a copy of this worksheet for your records.