

V6 Household Resources: 2015-2016 DEPENDENT Verification Worksheet

Federal Student Aid Programs

Your 2015-2016 FAFSA has been selected for review in a process called verification. During this process, Ohio Dominican will be comparing information from your FAFSA with information provided on this worksheet and any additional documentation required. Under federal law, we are required to review these documents before disbursing federal aid. If there are differences between your FAFSA and verification documents, corrections will be submitted by the Financial Aid Office.

INSTRUCTIONS: Complete all sections of this worksheet and submit required forms at the same time by fax, mail, or in person to the Financial Aid Office. Allow a minimum of 2 weeks for processing. Aid will not be applied to your student account until the entire process is complete. Once completed, there may or may not be changes to your financial aid eligibility. You will be notified if your eligibility changes.

A. Student Informa	ation		
Last Name	First Name	MI	ODU Student ID Number or Last 4 of social
Phone Number (includ	ing area code)		Date of Birth
B. Household and	College Information		

List the people in your parents' household in the space provided below. Include:

- yourself, even if you don't live with your parents,
- your parent(s) (include step-parent),
- your parents' other children, even if they do not live with your parent(s), IF (a) your parents will provide more than half of their support between July 1, 2015 and June 30, 2016, or (b) if they would be required to give parental information when applying for federal student aid, and
- other people IF they now live with your parents, your parents provide more than half of their support and will continue to provide more than half of their support between July 1, 2015 and June 30, 2016.

Write the name of the college in the designated column for anyone in your household, excluding your parent(s), who will be enrolled at least half time in a degree or certificate program between July 1, 2015 and June 30, 2016.

If you need more space, attach a separate page.

Full Name	Age	Relationship	College
		Self	Ohio Dominican University

C. Dependent Student and Parent(s) Income Information

1. TAX RETURN FILERS- Using the IRS Data Retrieval Tool (DRT) in FAFSA on the web is the best way to verify income. To use the tool go to FAFSA.gov, log in to your FAFSA record, select "Make FAFSA Corrections," and navigate to the Financial Information section of the form. From there, follow the instructions to determine if you are eligible to use the IRS DRT. If eligible, complete the steps to use the IRS DRT. Once the information is transferred be sure to sign and resubmit the FAFSA. If you or your parent(s) are unable to use the IRS DRT, attach a 2014 IRS Tax Return Transcript(s). To obtain an IRS Tax Return Transcript, go to www.IRS.gov and click on the "Get Transcript of Your Tax Records" under Tools. You have the option of selecting "Get Transcript Online" or "Get Transcript by Mail." If your parents are married and they filed separate 2014 tax returns, a tax return transcript must be submitted for each parent.

** If you or your parent(s) filed an amended IRS income tax return (1040X) for the 2014 tax year in addition to the options above, please attach a signed copy of the 1040X with this worksheet. **

Tax return filers check the box	(s) that apply:					
I, the student, used the IRS I	PRT.					
I, the student, attached my 20	014 IRS Tax Return Transcript.					
My parent(s) used the IRS D	RT.					
My parent(s) attached their 2	014 Tax Return Transcript (s).					
2. NONTAX RETURN FILE 2014 income tax return with the	RS- Complete this section if you RS.	and/or your parent(s)	will not and	d are not re	equired to file a	
Nontax return filers check the	box(s) that apply:					
I, the student, was not emplo	yed and had no income earned from	n work in 2014.				
My parent(s) was/were not e	mployed and had no income earne	d from work in 2014.				
	mployed in 2014 and will not and a ived in 2014 and attach a copy o					
Student	Source(s) of Income	2014 Aı	2014 Amount Earned		IRS W-2 Attached (Y or N/A)	
		\$				
		\$				
Parent Source(s) of Income		2014 Aı	2014 Amount Earned		IRS W-2 Attached (Y or N/A)	
		\$				
		\$				
D. Additional Financial Info	rmation					
1. In 2013 or 2014, did you/your	parent(s) or anyone in your house	nold receive the SNAP	benefit (foo	d stamps)?	Yes No	
If you responded 'Yes'	to receiving SNAP, circle the ye	ar(s) the benefit was r	eceived.	2013	2014	
2. Did you/your parent(s) pay ch	ild support for any children NOT 1	isted in your household	in 2014?		Yes No	
		·				
	to the above question, complete					
Name of Person Who Paid Child Support	Name of person to Whom Child Support was Paid	Name of Child for Support was P		Age of Child	Amount of Child Support Paid in 2014	
					\$	
					\$	
					\$	
					Ψ	

1. W-2 Tax Forms					
I have attached a copy of my/my paren	nt(s) 2014 W-2 tax forms .				
2. Complete the chart below. If any item	does not apply to you or your parent(s), enter	0. All blanks	must be complete	<u>ed</u> .	
Untaxed Income				Student	
	etirement savings-List any payments to tax-dding but not limited to amounts reported on Wis, H, and S.		\$	\$	
Child Support Received- List the actual amount of any child support received in 2014 for the children in your household.				\$	
Housing, food, and other living allowances paid to members of the military, clergy, and others-Include cash payments and/or the cash value of benefits received.				\$	
Veterans non-education benefits- Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Education Work-Study allowances.				\$	
Other Untaxed Income-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.				\$	
	Money received or paid on the student's behalf (e.g. bills), not reported elsewhere on this form- Include support from a parent whose information was not reported on the FAFSA and that is not part				
3. Please provide information below abo	ut any other resources, benefits, and other ames: federal veterans education benefits, military			ny members of	
Name of Recipient	Type of Financial Support	Amount o	of Financial Support Received in 2014		
Example: Tom Cruze	Untaxed Social Security Benefits	\$ 3000			
		\$			
		\$			
		\$			
1		\$			
		\$			
F. Sign this Worksheet		\$			
By signing this worksheet, I/we certify tha	t all information reported is complete and corne parent MUST sign. Warning: If you pur attenced to jail, or both.	\$ \$			
By signing this worksheet, I/we certify tha documentation may be required. At least o	ne parent <u>MUST</u> sign. Warning: If you pur	\$ \$	se or misleadin _{		

E. Other Untaxed Income