

2016-2017 Verification Worksheet – Independent

## OFFICE OF T INAINCIAL TIID

Your 2016-2017 Free Application for Federal Student Aid (FAFSA) was selected for the process of verification, which requires our office, per federal law, to compare your FAFSA results with required acceptable documentation. Our office may ask for additional documentation to resolve conflicting information. In our review, if there are differences our office will submit the corrections back into the federal processor and you will receive an updated FAFSA reflecting the corrections. If you have questions about verification, contact our office as soon as possible so that your financial aid will not be delayed.

| 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 Num                    | nber (include area code) | Student's Alternate or Cell Phone Number |                                  |  |

## B. Independent Student's Family Information

A. Independent Student's Information

How many people are in your household, during July 1, 2016 – June 30, 2017? List your household members in the Chart B1 below.

## Instructions:

Include full name, age and relationship for:

- Yourself (and your spouse, if you are married),
- Your children, if you will provide more than half of their financial support between July 1, 2016 and June 30, 2017, and
- Report other people if they now live with you, you provide more than half of the other people's support and will continue to provide more than half of their support through June 30, 2017.

Also, report the college name for yourself, and any household member that will be a college student between July 1, 2016 and June 30, 2017, only if they will attend, at least half-time in 2016-2017, a program that leads to a college degree or certificate.

## Chart B1:

| Full Name              | Age | Relationship   | College Name     | Will be Enrolled at Least |
|------------------------|-----|----------------|------------------|---------------------------|
|                        |     |                |                  | Half Time Between July 1, |
|                        |     |                |                  | 2016 and June 30, 2017    |
| Sharon Smith (example) | 18  | Child          | Linfield College | Yes                       |
|                        |     | Self (student) |                  |                           |
|                        |     |                |                  |                           |
|                        |     |                |                  |                           |
|                        |     |                |                  |                           |
|                        |     |                |                  |                           |

If you have additional family members and more space is needed, attach a separate page.

|                          | Name:  |  | SSN:  |  |  |
|--------------------------|--|--|---|--|--|
| . Incor                  | ne to be Ver   | ified for Student and Spous  | e, if Married   |  |  |
| ord<br>45                | eb, www.fafsa.g<br>der your 2015 IR<br>06-T to the IRS.  | ov, (recommended option) or obtain y<br>RS Tax Return Transcript at http://www<br>Otherwise follow alternate instruction   | rn filers to either use the IRS Data Retrieur 2015 IRS Tax Return Transcript fro wirs.gov/transcript, or call the IRS Toll as below. Do not submit copies of IRS Iments, IRS 1040 Schedule C, and IRS | om the IRS and submit it to<br>Free at 1-800-908-9946, or<br>Forms 1040, 1040A or 1040             | Linfield. You ca<br>submit IRS Fori<br><i>EZ.</i>            |
| DENT<br>neck<br>ox Below |  | 2015   | Γax Information   |  | SPOUSE, IF<br>STUDENT IS<br>MARRIED<br>Check<br>One Box Belo |
|                          | I did not work i   | n 2015. I was not employed and had   | no income earned from work in 2015.   |  |  |
|                          |  |  |   |  |  |
|                          | Samoa, the U. monetary amo  2015  A sig  | S. Virgin Islands, the Northern Marian<br>unts into U.S. dollars. I have attached<br>tax transcript from my local taxing au<br>gned copy of 2015 tax return filed with |   | nd I have converted the  |  |
|                          | I worked in 201  |  | n (1040, 1040A, 1040EZ), and I <u>have u</u> s  | sed the IRS Data   |  |
|                          |  | within my FAFSA to transfer my 2015  | i IRS data.<br>x return (1040, 1040A, 1040EZ), but I I  | and making house days laws   |  |
|                          | unable to use to IRS income information available to me that the IRS income  | the IRS Data Retrieval Tool in FAFSA formation into the student's FAFSA or e. Linfield cannot complete the verification formation has been transferred into the        | on the Web, <b>but I will use</b> the tool to lince I have filed a 2015 IRS federal tax ration process until we receive a successor FAFSA and the federal processor receive.                          | retrieve and transfer 2015 return or when it becomes sful FAFSA transaction ceives the correction. |  |
|                          | I worked in 2015 and I filed/will file a 2015 federal tax return (1040, 1040A, 1040EZ), I choose not to use or I am unable to use the IRS Data Retrieval Tool in FAFSA on the Web. I will provide a copy of my 2015 IRS Tax Return Transcript to Linfield later. I understand that Verification cannot be completed until the IRS Tax Return Transcript has been submitted to Linfield, and this may delay my financial aid.                       |  |   |  |  |
|                          | I have attached  | d a copy of my 2015 IRS Tax Return   | Transcript to this worksheet.   |  |  |
|                          | I <u>filed an extension</u> of my 2015 Federal IRS Tax Returns, attached are copies of my 2015 IRS Form 4868, copies of my 2015 W-2 Statement(s) and (if self-employed) a signed statement of the amount of my 2015 Adjusted Gross Income (AGI).  I had to file an IRS 1040X form to <u>amend my 2015 Federal IRS Tax Returns</u> , and I have attached:  A 2015 IRS Tax Return Transcript that includes information from the original return, and |  |   |  |  |
|                          |  |  |   |  |  |
|                          | A signature  I am a victim o   | gned copy of my amended IRS Form<br>f IRS tax-related ID Theft. I have con   | 1040X 2015 Tax Return that was filed vacted the IRS's Identity Protection Spe   | with the IRS.<br>ecialized Unit (IPSU) at 1-   |  |
|                          | I am a victim of IRS tax-related ID Theft. I have contacted the IRS's Identity Protection Specialized Unit (IPSU) at 1-800-908-4490 to obtain a copy of my 2015 Tax Return Data Base View (TRDBV) transcript. I have attached:  • A copy of my 2015 Tax Return Data Base View (TRDBV) transcript, and  |  |   |  |  |
|                          | thef   | t and that the IRS has been made aw  |   | <u> </u>   |  |
|                          | listed above, a  | nd I am unable to utilize the IRS Data   | ollege, because I have a situation that on Retrieval Tool (DRT), and I am not ab  |  |  |
|                          |  | Return Transcript.  ed in 2015 and had income, but am  | not required to file a 2015 Federal Ta  | ax Return and I will list  |  |
|                          | I was employed in 2015 and had income, but am not required to file a 2015 Federal Tax Return and I will list the names of all of my employers below and the amount that was earned in 2015 and attach a copy of my Federal W-2 Statements to this worksheet:   |  |   |  |  |
|                          |  | Employer's Name  | 2015 Amount Earned  | W-2 Attached?*   |  |
|                          | Suzy's Auto Bo   | ody Shop (example)   | \$2,000.00 (example)  | Yes (example)  |  |
|                          |  |  |   |  |  |
|                          | <u> </u>   |  |   |  |  |
|                          |  |  |   |  |  |

Transcript from the IRS online at <a href="http://www.irs.gov/transcript">http://www.irs.gov/transcript</a> and attach it to this worksheet.

| Stu                           | udent's Name:   |  | SSN:  |  |  |  |  |  |  |
|-------------------------------|---|--|---|--|--|--|--|--|--|
| D.                            | . Independent Student's Verification of SNAP (food stamps) At any time in 2014 or 2015 did you, the student, or anyone in your household (listed in Chart B1 of this works receive benefits from the Supplemental Nutrition Assistance Program (SNAP)?  |  |   |  |  |  |  |  |  |
|                               | □ No □ Yes  |  |   |  |  |  |  |  |  |
|                               | If asked by Linfield College, I another name in some states.  | will provide documentation of the receipt of<br>For assistance in determining the name u | SNAP benefits during 2014 and/or .<br>sed in a state, please call 1-800 4 F | 2015. SNAP may be known by<br>ED AID (1-800-433-3243). |  |  |  |  |  |
| E.                            | Independent Student's Verification of Child Support Paid At any time in 2015 did you or your spouse, if married, pay out child support?   |  |   |  |  |  |  |  |  |
|                               | No, skip Chart E1 below, and provide signatures in Section F. Yes, complete Chart E1 below.   |  |   |  |  |  |  |  |  |
|                               | Instructions: Indicate below the name of the person who paid the child support, the name of the person to whom the child support was paid, the names of the children for whom child support was paid, and the <b>total 2015 annual amount</b> of child support that was paid in 2015 for each child.  If asked by Linfield College, you will provide documentation of child support paid. |  |   |  |  |  |  |  |  |
|                               |   |  |   |  |  |  |  |  |  |
|                               | Chart E1:   |  |   |  |  |  |  |  |  |
|                               | Name of Person Who Paid   | Name of Person to Whom Child   | Name of Child for Whom  | Total Annual   |  |  |  |  |  |
|                               | Child Support   | Support was Paid   | Support Was Paid  | Amount of Child<br>Support Paid in<br>2015             |  |  |  |  |  |
|                               | Marty Jones   | Chris Smith (example)  | Terry Jones   | \$6,000.00   |  |  |  |  |  |
|                               |   |  |   |  |  |  |  |  |  |
|                               |   |  |   |  |  |  |  |  |  |
| F.                            | Certification and Signatures  By signing this worksheet I certify that all of the information reported on it is complete and correct. I understand that purposely providing   |  |   |  |  |  |  |  |  |
|                               | false or misleading information on  | eration or both.   |   |  |  |  |  |  |  |
| Student's Signature           |   |  | Date  |  |  |  |  |  |  |
| Spouse's Signature - Optional |   |  | Date  |  |  |  |  |  |  |

Submit this worksheet to the Office of Financial Aid at Linfield College via fax, email or mail.

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