

2016–2017 Verification Worksheet

Independent Student

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) may be 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 reported on your FAFSA. To verify that you provided correct information we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. ***Tax transcripts and W2s are ONLY needed if your FAFSA is selected for verification.*** If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

A. Independent Student's Information

Student's Last Name	Student's First Name	Student's M.I.	Student ID Number
Student's Date of Birth	Student's Housing Plan: Off Campus <input type="checkbox"/> With Parents <input type="checkbox"/> Dorms <input type="checkbox"/>		
Student's Home Phone Number (include area code)	Student's Alternate or Cell Phone Number		

B. Independent Student's Number of Household Members and Number in College

Number of Household Members: List below the people in the student's household. Include:

- The student.
- The student's spouse, if the student is married.
- The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2016, through June 30, 2017, even if a child does not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of the other person's support, and will continue to provide more than half of their support through June 30, 2017. *(You may be asked to provide proof.)*

Number in College: Please include in the space below information about any household member who is, or will be, enrolled at least half time, in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2016, and June 30, 2017, including the name of the college. *Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.*

If more space is needed, provide a separate page with the student's name and ID Number at the top.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
		<i>Self</i>	<i>Sierra College</i>	

C. Independent Student's Income Information to Be Verified - (Complete only Section 1 or 2, not both)

1. **TAX RETURN FILERS**—**Important Note:** The instructions below apply to the student and spouse, if the student is married. Notify the financial aid office if the student or spouse filed separate IRS income tax returns for 2015 or had a change in marital status after December 31, 2015.

Instructions: Complete this section if the student and spouse filed or will file a 2015 IRS income tax return(s). *The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web at FAFSA.gov.* In most cases, no further documentation is needed to verify 2015 income information that was transferred into the student's FAFSA using the IRS DRT if that information was not changed by the FAFSA filer.

Check the box that applies:

- The student has used the IRS DRT in *FAFSA on the Web* to transfer 2015 IRS income tax return information into the student's FAFSA.
- The student is unable or chooses not to use the IRS DRT in *FAFSA on the Web*, and instead will provide the school a **2015 IRS Tax Return Transcript(s)**.

A 2015 IRS Tax Return Transcript may be obtained through the:

<ul style="list-style-type: none"> • Online Request - Go to www.irs.gov, under the Tools heading on the IRS homepage, click "Get a Tax Transcript by Mail." Click "Get Transcript by MAIL." Make sure to request the "IRS Tax Return Transcript" and NOT the "IRS Tax Account Transcript." 	
<ul style="list-style-type: none"> • Telephone Request - 1-800-908-9946 	<ul style="list-style-type: none"> • Paper Request Form - IRS Form 4506T-EZ or IRS Form 4506-T

*In most cases, for electronic tax return filers, 2015 IRS income tax return information is available for the IRS DRT or the IRS Tax Return Transcript within 2–3 weeks after the 2015 electronic IRS income tax return has been accepted by the IRS. Generally, for filers of 2015 paper IRS income tax returns, the 2015 IRS income tax return information is available for the IRS DRT or the IRS Tax Return Transcript within 6-8 weeks after the 2015 paper IRS income tax return has been received by the IRS. Contact the financial aid office if more information is needed about using the IRS DRT or obtaining an IRS Tax Return Transcript. If the student and spouse filed separate 2015 IRS income tax returns, **2015 IRS Tax Return Transcript(s)** must be provided for each.*

2. **TAX RETURN NON-FILERS**— The instructions and certifications below apply to the student and spouse, if the student is married. Complete this section if the student and spouse will not file and are not required to file a 2015 income tax return with the IRS. Note: We may require you to provide documentation from the IRS that indicates a 2015 IRS income tax return was not filed with the IRS. **If your net earnings from self-employment were \$400 or more, you are required to file a Form 1040 and Schedule C.**

Check the box that applies:

- The student and spouse were not employed and had no income earned from work in 2015.
- The student and/or spouse were employed in 2015 and have listed below the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is provided. [Provide copies of all 2015 IRS W-2 forms issued to the student and spouse by their employers]. List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, provide a separate page with the student's name and ID number at the top.

Employer's Name	Annual Amount Earned in 2015	IRS W-2 Provided?
<i>ABC's Auto Body Shop (example)</i>	<i>\$4,500.00</i>	<i>Yes</i>
<i>Total Amount of Income Earned From Work</i>	<i>\$</i>	

Student's Name: _____ Student ID: _____

(If any item does not apply, enter "N/A" for Not Applicable where a response is requested, or enter 0 in an area where an amount is requested.)

D. 2015 Untaxed Income - To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2015, multiply that amount by the number of months in 2015 you paid or received it. If you did not pay or receive the same amount each month in 2015, add together the amounts you paid or received each month. If more space is needed, provide a separate page with the student's name and ID number at the top.

2015 Untaxed Income		Student (and spouse, if applicable)				
1. Payments to tax-deferred pension and retirement savings plans 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 12d with codes D, E, F, G, H and S. Name of Person Who Made the Payment: _____		\$ _____				
2. 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.		\$ _____				
<table border="1"> <tr> <td>Name of Adult Who Received the Support</td> <td>Name of Child For Whom Support Was Received</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		Name of Adult Who Received the Support	Name of Child For Whom Support Was Received			
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3. 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. Do not include the value of on-base military housing or the value of a basic military allowance for housing.		\$ _____				
4. 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: Post-9/11 GI Bill, Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits		\$ _____				
5. 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 benefits, 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 1 – 4 above. In addition, do not include extended foster care benefits, student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Innovation and Opportunity Act (WIOA) educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.		\$ _____				
<table border="1"> <tr> <td>Name of Recipient</td> <td>Type of Other Untaxed Income</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		Name of Recipient	Type of Other Untaxed Income			
Name of Recipient	Type of Other Untaxed Income					
6. 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 <u>was not</u> 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 2016–2017 FAFSA. Amounts paid on the student's behalf also include any distributions to the student from a 529 plan <u>owned by someone other than the student or the student's parents</u> , such as grandparents, aunts, and uncles of the student.		\$ _____				
<table border="1"> <tr> <td>Purpose: e.g., Cash, Rent, Books</td> <td>Source</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		Purpose: e.g., Cash, Rent, Books	Source			
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Student's Name: _____ Student ID: _____

(If any item does not apply, enter "N/A" for Not Applicable where a response is requested, or enter 0 in an area where an amount is requested.)

E. Independent Student's Other Information to Be Verified

1. Did someone in the student's household (listed in Section B) receive benefits from the **Supplemental Nutrition Assistance Program (SNAP)** sometime during 2014 or 2015? SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243). If yes, please complete the **Receipt of SNAP Benefits 2016-2017** form. The form is available from the Financial Aid Office, or may be printed from our website, www.sierracollege.edu. *Bring in the original Food Stamps Debit Card for us to copy, or attach documentation from the agency that issues SNAP benefits.*

NO YES

2. Did the student and/or spouse (who is a member of the student's household) **PAY child support** in 2015? If yes, please complete the **Child Support Paid Statement** for 2016/2017. The form is available from the Financial Aid Office, or may be printed from our website, www.sierracollege.edu.

NO YES

3. **Additional information:** Please provide information about any other resources, benefits, untaxed pensions, untaxed unemployment, and other amounts received by the student and any members of the student's household. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office, and include such things as student aid, untaxed disability, AFDC/TANF (Welfare), SNAP (Food Stamps), SSI, Social Security, federal veterans' education benefits, military housing, etc. If more space is needed, provide a separate page with the student's name and ID number at the top.

Name of Recipient	Type of Financial Support	Annual Amount of Financial Support Received in 2015
Total Amount of Financial Support Received		\$

F. Student's and Spouse's Asset Information (as of the date the FAFSA was completed)

Total cash, savings, and checking accounts. Don't include student financial aid. \$ _____

Net worth of your investments, including rental real estate. **Don't include the home you live in.** \$ _____
 Net worth means current value minus debt.

Net worth of your current businesses and /or investment farms. **Don't include a family business or family farm with 100 or fewer full-time or full-time equivalent employees.** \$ _____

✓ *If you completed Schedule E on your taxes, be prepared to provide additional documentation.*

Student's Name: _____ Student ID: _____

G. Low Income Section

***Complete ONLY if yours and your spouse's 2015 Income was less than \$6,000**

Did you and your spouse (if married) live with a relative or someone else who provided free room and board in 2015?

NO YES — NAME: _____ RELATIONSHIP: _____

If YES, was your name listed on the lease/mortgage? YES NO

PLEASE LIST YOURS AND YOUR SPOUSE'S MONTHLY EXPENSES AND INDICATE WHO PAID FOR THE EXPENSES DURING THE 2015 CALENDAR YEAR. IF YOU LIVED WITH SOMEONE WHO PAID THE EXPENSES, INDICATE WHAT YOUR PORTION WOULD BE IF YOU WERE PAYING THE EXPENSES.

STUDENT/SPOUSE LIVING EXPENSES	2015 MONTHLY EXPENSES	WHO PAID THIS EXPENSE?
1. Housing (rent/mortgage)	\$	
2. Utilities	\$	
3. Food	\$	
4. Child Care	\$	
5. Credit Card(s)	\$	
6. Medical/Dental	\$	
7. Transportation	\$	
8. Other Personal Expenses	\$	
9. TOTAL MONTHLY EXPENSES	\$	
TOTAL YEARLY EXPENSES (Line 9 x 12 months)	\$	

EXPLAIN IN DETAIL HOW YOU SURVIVED ON SUCH LOW INCOME IN 2015. If your net earnings from self-employment were \$400 or more, you are required to file a Form 1040 and Schedule C.

H. Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sent to prison, or both.

Student's Signature

Date

Spouse's Signature

Date