Student's Program	
[School Use ONLY Box]	

2016–2017 Verification Worksheet Independent Student (V1)

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, the school may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the school. The school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

٩.	. Independent Student's Info	ormation:			
	Student's Last Name	Student's First Name	Stud. M.I.	Stud. D.O.B.	Student's Soc Sec Number

B. Independent Student's Family Information:

List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2016 through June 30, 2017, or if the child would be required to provide your information if they were completing a FAFSA for 2016–2017. Include children who meet either of these standards, even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.
- DO NOT include persons for whom you or your spouse paid child support assuming that child support paid is reported on the FAFSA.

Include the name of the college for any household member who will be enrolled at least half time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2016 and June 30, 2017. *If more space is needed, attach a separate page with your name and Social Security Number at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at
				Least Half Time
				(Yes/No)
		Self		

Student's Name:			SSN:			
C. Independent Student's Income Information to Be Verified: (applicable to the student and spouse, if married)						
1.	Note: If your sch	you filed or will file an <u>amended</u> 20 gool before completing this INCOME s	mplete this section if you <u>filed or will file</u> a 2015 income tax return with the IRS. <u>mended</u> 2015 IRS tax return, you must contact the financial aid administrator at INCOME section. <i>The best way to verify income is by using the IRS Data AFSA on the Web.</i> Check the box that applies:			
		You and/or your spouse have already transfer 2015 IRS income tax return inf			the Web to retrieve and	
	ш,	You and/or your spouse <u>have not yet use</u> the tool to retrieve and transfer 20 filed a 2015 IRS tax return and it is ava	15 IRS income	tax return information into you		
	Informa Retriev income	<u>FAFSA.gov</u> , log in to your FAFSA ration section of the form. Then, follow al Tool to transfer your 2015 IRS in information to be available for electred more information about using the IR	the instruction come tax infor onic IRS tax re	ns to determine if you are elig mation into your FAFSA. It t turn filers and 8-11 weeks for p	ible to use the IRS Data takes 2-3 weeks for IRS paper IRS tax returns. If	
		You are <u>unable or choose not to</u> use available to the school a 2015 IRS tax are married and did not file jointly, a 20	return transc	ript (not a photocopy of the in	come tax return). If you	
	school. by your 908-994 Social S	e to use the IRS Data Retrieval Tool, the To obtain an IRS tax return transcrip school), (2) go to www.IRS.gov and ure 6. Regardless of the method, the only becurity Number, date of birth, and the S tax return was filed). Make sure to re	t either (1) com ader Tools, clici choice curren e address on fi	plete a Tax Return Transcript c on "Get A Tax Transcript" or tly is to get the transcript by m le with the IRS (normally the	Request Form (provided (3) you may call 1-800- ail. You will need your	
2.	TAX RETURN NONFILERS* - Complete this section if you and/or your spouse will <u>not file</u> and are <u>not required</u> to file a 2015 income tax return with the IRS. Check the box that applies:					
	You and/or your spouse were not employed and had no income earned from work in 2015.					
	You and/or your spouse were employed in 2015 and you have listed below the names of all your employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is attached. You must attach a copy of all 2015 IRS W-2 forms issued to you by employers or give a valid reason why a W-2 is not available. List every employer even if they did not issue an IRS W-2 form. If more space is needed, attach a separate page with your name and Social Security Number at the top.					
		Employer's Name		Annual Amount Earned in 2015	IRS W-2 Attached? (Yes/No)	
		Total Amount of Income Earn	ned from Work	\$		

*Note: The school may require you to provide documentation from the IRS that indicates a 2015 tax return was not filed with the IRS.

Student's Name:		SSN:		
. Child Support <u>Paid</u> : Mark and	complete the appropriate	section regarding 2015 <u>pa</u>	aid child support.	
child support, the name of whom child support was pa asked by the school, you m support or electronic docum	the person to whom the child suid, and the total annual amount ay need to provide documentation of payment(s).	upport was paid, the names a of child support that was pa	and ages of the children for id in 2015 for each child. It	
Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name and Age of Child for Whom Support Was Paid	Annual Amount of Child Support Paid in 2015	
Marty Jones(example)	Chris Smith (example)	Terry Jones (example)	\$6,000.00(example)	
If you need more space, attach a Receipt of SNAP Benefits: Man	rk and complete the appro			
Application for Federal St Program (SNAP or formerl be asked to provide document No one in your household	at	benefits from the Supplem time during the 2014 or 201 sued the SNAP benefits in 20 Supplemental Nutrition Ass	nental Nutrition Assistance 5 calendar years. You may 014 or 2015. istance Program or SNAI	
	amps, at any ame daming the 20			
F. Certification and Signatures: I certify that all of the information reported on this worksheet is complete and correct.		WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.		
Student's Signature		Date		