

# 2015–2016 VERIFICATION WORKSHEET DEPENDENT STUDENT

Your 2015–2016 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, we may ask you to confirm the information you and your parents 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 and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your 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.

## A. Dependent Student's Information

NAME \_\_\_\_\_

Last

First

MI

Student ID Number

ADDRESS \_\_\_\_\_

Street Address

Apt. #

City

State

Zip Code

DATE OF BIRTH \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

HOME PHONE NUMBER \_\_\_\_\_ ALTERNATE/CELL-PHONE NUMBER \_\_\_\_\_

(Including area code)

(Including area code)

## B. Dependent Student's Family Information

**Number of Household Members:** List below the people in the parents' household. Include:

- The student.
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parents' other children if the parents will provide more than half of the children's support from July 1, 2015, through June 30, 2016, or if the other children would be required to provide parental information if they were completing a FAFSA for 2015-2016. Include children who meet either of these standards even if the children do not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of the other people's support and will continue to provide more than half of their support through June 30, 2016.

**Number in College:** Include below information about any household member, excluding the parents, who 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, 2015, and June 30, 2016, include the name of the college. If more space is needed, provide a separate page with the student's name and "V" number at the top.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
<i>Example: Missy Jones</i>	<i>18</i>	<i>Sister</i>	<i>Central University</i>	<i>Yes</i>



**VCU** Division of Strategic Enrollment Management

VIRGINIA COMMONWEALTH UNIVERSITY

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(804) 828-6669 • Fax (804) 827-0060 • [www.enrollment.vcu.edu/finaid](http://www.enrollment.vcu.edu/finaid)

NAME \_\_\_\_\_  
Last First MI

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Student ID Number

**C. Student Non-Tax 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 2014 income tax return with the IRS. Provide a copy of IRS verification of non-filing of returns for student.

**Check all boxes that apply:**

- The student and spouse were not employed and had no income earned from work in 2014.
- The student and/or spouse were employed in 2014 and have listed below the names of all employers, the amount earned from each employer in 2014, and whether an IRS W-2 form is provided. (Provide copies of all 2014 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 "V" number at the top.

Employer's Name	2014 Amount Earned	Was W-2 Provided by Employer?
<b>Example:</b> <i>Suzy's Auto Body Shop</i>	<i>\$2,000.00</i>	<i>Yes</i>

**D. Parent Non Tax Filers**

The instructions and certifications below apply to each parent included in the household. Complete this section if the parents will not file and are **not required** to file a 2014 income tax return with the IRS. Provide a copy of IRS verification of non-filing of returns for parent.

**Check all boxes that apply:**

- Neither parent was employed and had no income earned from work in 2014.
- One or both parents were employed in 2014 and have listed below the names of all employers, the amount earned from each employer in 2014, and whether an IRS W-2 form is provided. (Provide copies of all 2014 IRS W-2 forms issued to the parents 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 "V" number at the top.

Employer's Name	2014 Amount Earned	Was W-2 Provided by Employer?
<b>Example:</b> <i>Suzy's Auto Body Shop</i>	<i>\$2,000.00</i>	<i>Yes</i>



NAME \_\_\_\_\_  
Last First MI

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Student ID Number

**E. Supplemental Nutrition Assistance Program (SNAP)**

**Check the appropriate box below:**

- No one in listed in the household received SNAP benefits in 2013 or 2014.
- One of the persons listed in household received SNAP benefits in 2013 or 2014. If asked by the student's school, I will provide documentation of the receipt of SNAP benefits during 2013 and/or 2014.

**F. Child support paid**

**Check the appropriate box below:**

- No child support was paid for individuals outside of the household for 2014.
- One (or both) of the student's parents listed in Section B of this worksheet paid child support in 2014. The parent has indicated 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 total annual amount of child support that was paid in 2014 for each child. If asked by the school, we will provide documentation of the payment of child support. If you need more space, attach a separate page that includes the student's name and "V" number on the top.

Name of Person who Paid Child Support	Name of Person to whom Child Support was Paid	Name of Child for whom Support was Paid	Amount of Child Support Paid in 2014
<i>Example: Joe Jones</i>	<i>Jane Doe</i>	<i>Jake Jones</i>	<i>\$6,000</i>

**G. Other Untaxed Income**

Complete this section if you or your parents had untaxed income in 2014.

If any Item does not apply enter "N/A" where a response is requested or enter "0" if an amount is requested.

Name of Person Who had Untaxed Income	Type of Untaxed Income Received	Student Amount	Parent Amount
<i>Example: Jim Jones</i>	<i>Money received or paid on the students behalf</i>	<i>\$500.00</i>	<i>0</i>
	Payments to tax-deferred pension and savings plans		
	Housing, food, and other living allowances paid to members of the military, clergy		
	Veterans noneducation benefits		
	Money received or paid on the students behalf		
	Other untaxed income		

**Other Untaxed Income Includes:** Untaxed income not reported elsewhere on this form, workers' compensation, disability, black lung benefits, untaxed portions of health savings accounts from IRS Form 1040 line 25, railroad retirement benefits, etc.

**Do Not Include:** Student aid, earned income credit, additional child tax credit, TANF, untaxed social security benefits, SSI, WIA, combat pay, benefits from flexible spending arrangements, foreign income exclusion or credit for federal tax on special fuels.



NAME \_\_\_\_\_  
Last First MI

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Student ID Number

**H. Child Support Received**

Complete this section if child support was received in 2014 for any children listed in your household.

Name of Person who Received Child Support	Name of Child for whom Support was Paid	Amount of Child Support Received in 2014
<i>Example: Joe Jones</i>	<i>Jim Jones</i>	<i>\$5,000</i>

**Do Not Include:** Foster care payments, adoption payments or any amount that was court ordered but not actually paid.

**I. Certification and Signatures**

Each person signing this worksheet certifies that all of the information reported on it 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.

**The student and one parent must sign and date.**

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the financial aid administrator at your school. You should make a copy of this worksheet for your records.

