California Lutheran University - Office of Financial Aid

15-16 VD1

Dependent Verification Worksheet Federal Student Aid Programs

Your 2015-2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. 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 Office of Financial Aid. We may ask for additional information. Should you require further instructions, please contact our office at (805) 493-3115 or finaid@callutheran.edu.

A. Student Information							
Last Name	First Name		М	.I. CLU ID # or S	ocial Security Number		
		@call	utheran.	edu			
Date of Birth	E-mail add	ress		Current phone	nt phone number (include area code)		
B. Number of Household Members and Number in College							
List the people in your parent(s)' household, including: ➤ Yourself AND ➤ Your parent(s): Include parents who are listed on your FAFSA (including a stepparent) AND ➤ Your sibling(s): Include sibling(s) who meet either of these standards even if they do not live with your parents: a) if your parents will provide more than half of your sibling's support from July 1, 2015 through June 30, 2016 or b) if your sibling(s) would be required to provide parental information on their FAFSA for 2015—2016 AND ➤ Other people: Include other people as part of the household if they live with your parents currently, your parents provide more than half of their support, and your parents will continue to provide more than half of their support through June 30, 2016							
First and last name of family member		Relationship to student	Age	Name of <u>COLLEGE</u> f	amily member will attend *		
1.		Self		California Lutheran University			
2.							
3.							
4.							
5.							
* For family members 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. Do Not include name of the college if the family member is your parent.							
If more space is needed, provide a separate page with the student's name and ID number at the top.							
C. Child Support Paid							
 In 2014, did anyone in parent(s)' household make child support payments to another person? YES (please complete chart below) NO 							
Name of person who made child support payment(s) Name of person who made child support support payment(s)		son who received child nent(s)	Name of child for whom child support was paid		Total amount paid between January 1 - December 31, 2014		
					\$		
					\$		
If more space is needed, provide a separate page with the student's name and ID number at the top.							
D. Docoint of SNAD Ronofits							

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1.	Did any member of the parent(s)' household receive benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2013 or 2014?
	□ YES
	\square NO

Note: If we have reason to believe that the information regarding the payment of child support and/or receipt of SNAP benefits is inaccurate, we may require further documentation.

E. Income Verification for 2014

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 <u>FAFSA.gov</u>. In most cases, no further documentation is needed to verify 2014 IRS income tax return information that was transferred into the student's FAFSA using the IRS DRT if that information was not changed. Contact the financial aid office if more information is needed about using the IRS DRT. Please wait <u>3 weeks</u> after electronically filing your tax return before using the Data Retrieval Tool or downloading your Return Transcript.

1.	(PARENT) Check the box that applies:			
	The parents <u>have used or plan to use</u> the IRS DRT student's FAFSA.	in FAFSA on the Web to transfer 2014 IF	RS income tax return informati	on into the
	The parents are <u>unable to use</u> the IRS DRT in FAFS To obtain an IRS Tax Return Transcript, go to www If the parents filed separate 2014 IRS income tax (DO NOT send a photocopy of the income tax ret	v.IRS.gov and click on the "Get Transcrip returns, 2014 IRS Tax Return Transcripts	t of Your Tax Records" link.	ırn Transcript(s).
	The parents will not file and <u>are not required</u> to fi Check here if neither parent(s) were employ Check here if one or both parents were employer in 2014. Any parent who check their employers. List every employer, even if not filing a tax return.	red and had no income earned from wor cloyed in 2014 and list below the names cks this option <i>must provide</i> copies of al	k in 2014. of all employers and the amou I 2014 IRS W-2 forms issued to	the parent by
	Employer's Name (for non-tax filers only)		Amount earned in 2014	W-2 Attached
			\$	
			\$	
2.	The student has used or plans to use the IRS DRT student's FAFSA. The student is unable to use the IRS DRT in FAFSA obtain an IRS Tax Return Transcript, go to www.IF (Do NOT send a photocopy of the income tax ret. The student will not file and is not required to file. Check here if the student was not employed. Check here if the student was employed in 2 employer in 2014. Any student who checks this/her employers. List every employer, even are not filing a tax return. Employer's Name (for non-tax filers only)	A on the Web, and instead will provide the RS.gov and click on the "Get Transcript of urn) e a 2014 income tax return with the IRS (all and had no income earned from work in 2014 and list below the names of all emphis option must provide copies of all 2016	ne school a 2014 IRS Tax Retur f Your Tax Records" link. complete explanation below): n 2014. ployers and the amount earner	n Transcript(s). To d from each student by
3.	In 2014, did any member of the parent(s)' household YES (please include a copy of Form 1099 for the		on or retirement account?	
F.	Certifications and Signature	es		
rep	h person signing below certifies that all of the information or the FAFSA must sign and date. WARNING: If your both.			
			RETURN TO: CLU Office of Financ	
	dent's Signature – Required	Date	60 West Olsen Road Thousand Oaks, CA 9 EMAIL: finaid@callu FAX: (805) 493-3114	91360
Par	ent's Signature – Required	Date	FAA. (603) 433-3114	