



2016-2017 Verification Worksheet Independent Student - Tracking Group V5

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, we may ask you to confirm the information you and your spouse (if married) 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 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. Independent Student's Information				
Student's Last Name	Student's First Name		MI	Student's SSN or ID Number
Student's Street Address (include apt. no.)				Student's Date of Birth
City	State	Zip		Student's Email Address
Student's Phone Number		Studen	t's Alterna	ate or Cell Phone Number

B. Independent Student's Family Information

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 that person's support through June 30, 2017.

Number in College: Please include in the space below information about any household member who is, or will be, enrolled <u>at least half time</u> in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2016, and June 30, 2017, include the name of the college.

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
Missy Jones (example)	28	Spouse	Central University	Yes

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.

C. Independent Student's Income Information to Be Verified

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

Stu	dent Name:	Student ID Number:
spous	e filed separate IRS income tax returns for 2015 or had a change in	n marital status after the end of the 2015 tax year on December 31, 2015.
the IR	S Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web a	ill file a 2015 IRS income tax return(s). The best way to verify income is by using at <u>FAFSA.gov</u> . In most cases, no further documentation is needed to verify 2015 the IRS DRT if that information was not changed by the FAFSA filer.
Check	the box that applies:	
	The student <u>has used</u> the IRS DRT in <i>FAFSA on the Web</i> to transfe	er 2015 IRS income tax return information into the student's FAFSA.
	The student <u>has not yet used</u> the IRS DRT in <i>FAFSA on the Web</i> , I student's FAFSA once the 2015 IRS income tax return has been for	but will use the tool to transfer 2015 IRS income tax return information into the iled.
	The student is <u>unable or chooses not to use</u> the IRS DRT in FAFSA Transcript(s) .	4 on the Web, and instead will provide the school with a 2015 IRS Tax Return
Δ	A 2015 IRS Tax Return Transcript may be obtained through:	
•	Online Request - Go to www.IRS.gov , under the Tools head Transcript by MAIL." Make sure to request the "IRS Tax Return Telephone Request - 1-800-908-9946	ding on the IRS homepage, click on the "Get a Transcript by Mail." Click "Get n Transcript" and NOT the "IRS Tax Account Transcript."
•	Paper Request Form – Use the links to download IRS Form 45	<u>06T-EZ</u> or IRS Form <u>4506-T</u>
		entification number) and the date of birth of the first person listed on the 2015 ly this will be the address used on the 2015 IRS income tax return).
v r II	within 2–3 weeks after the 2015 electronic IRS income tax return leturns, the 2015 IRS income tax information is available for the I	return information is available for the IRS DRT or the IRS Tax Return Transcript has been accepted by the IRS. Generally, for filers of 2015 paper IRS income tax RS DRT or the IRS Tax Return Transcript within 6-8 weeks after the 2015 paper financial aid office if more information is needed about using the IRS DRT or
	f the student and spouse filed separate 2015 IRS income tax retur be provided for each.	rns, the IRS DRT cannot be used and the 2015 IRS Tax Return Transcript(s) must
	Check here if a 2015 IRS Tax Return Transcript(s) is provide	ed.
	Check here if a 2015 IRS Tax Return Transcript(s) will be pro	ovided later.
2. No	ontax Filers	
	nstructions and certifications below apply to the student and spous elete this section if the student and spouse will not file and are <u>not</u>	
Check	the box that applies:	
	The student and spouse were not employed and had no income	earned from work in 2015.
		ed below the names of all employers, the amount earned from each employer in pies of all 2015 IRS W-2 forms issued to the student and/or spouse by their is W-2 form.
If moon	ra chaca is peeded, provide a coparate page with the student's par	no and ID number at the ten

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

Employer's Name	2015 Amount Earned	IRS W-2 Attached?
ABC Shipping (example)	\$1,280	Yes

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.

Student Name:		Student ID Number:	
D. Other Information to Be Verified			
1. Supplemental Nutrition Assistance	e Program (SNAP) Benefits, check the	e box that applies:	
No one listed in the household re	eceived SNAP benefits in 2014 or 201	15.	
One of the persons listed in hous	sehold received SNAP benefits in 201	1.4 or 2015.	
Note: If we have reason to helieve that	the information regarding the recein	t of SNAP benefits is inaccurate, we may r	equire documentation from
the agency that issued the SNAP benefit		tor or with benefits to indecardee, we may t	equile documentation nom
2. Child Support Paid, check the box th	at applies:		
No child support was paid for inc	dividuals outside of the household in	2015.	
household. Provide in the space	e below the names of the persons v	sehold, paid child support in 2015 for a cl who paid the child support, the names o d support was paid, and the total annual	f the persons to whom the child
If more space is needed, provide a separ			
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 2015
Joe Jones	Jane Doe	Jake Jones	\$6,000
 A signed statement from the i Copies of the child support par E. High School Completion Status	ndividual receiving the child support yment checks, money order receipts	ort paid is inaccurate, we may require add certifying the amount of child support red , or similar records of electronic payment pol completion status when the student begi	eived; or having been made.
Check the box of the document you wil	l attach to this worksheet:		
A copy of the Student's high scho			
	·		
A copy of the student's final office	ial nigh school transcript that snows	the date when the diploma was awarded	
	eceived by a student after the stude ma (GED test, HiSET, TASC, or other S	ent passed a State-authorized examination State-authorized examination).	n that the State recognizes as the
For students who completed se document.	condary education in a foreign coul	ntry, a copy of the "secondary school lea	aving certificate" or other similar
An academic transcript that indicate bachelor's degree.	cates the student successfully compl	leted at least a two-year program that is a	acceptable for full credit toward a
	n a state where state law require chool diploma or its recognized equiv	es the student to obtain a secondary svalent), a copy of that credential.	chool completion credential for
homeschool (other than a high s	school diploma or its recognized equry school courses the student comp	require the student to obtain a secondary uivalent), a transcript or the equivalent, s leted and includes a statement that the	signed by the student's parent or

A student who is unable to obtain the documentation listed above must contact the financial aid office.

		S	tudent ID Number:	_
F. Identity and Statement of Education	onal Purpose			_
lde	entity and Statement of Educ	ation Purpose	(Signed in person at the Institution)	
identification (ID), such as, but not lin photo ID that is annotated by the inst	nited to, a driver's license, otl titution with the date it was re	her state-issue eceived and re	r identity by presenting an unexpired valid governme d ID, or passport. The institution will maintain a copy viewed and the name of the official at the institution esence of the institutional official, the Statement of E	of the student's authorized to
Identity and Statement of Ed	ducational Purpose (Signed in	n the Presence	of a Notary only if unable to sign in person at the in	stitution)
(a) A copy of the unexpired v presented to a notary, such(b) The original Statement of E	ralid government-issued phot n as, but not limited to, a drive ducational Purpose provided	to identificatio er's license, ot I below, which	his or her identity, the student must provide to the in (ID) that is acknowledged in the notary statement ner state-issued ID, or passport; and must be notarized. If the notary statement appears of lication that the Statement of Educational Purpose v	t below, or that on a separate pa
To be completed <u>only</u> in the presenc	_	-		
		of Educationa	•	
certify that I(Deint Studently No.		the individual	signing this Statement of Educational Purpose and th	at the
(Print Student's Na	•		ourposes and to pay the cost of attending Georgia M	
	(Student ID)	(Date)	(Financial Aid Administrator Signature) (D	 Date)
(Student's Signature)	1	I		·
(Student's Signature)				·
		s Certificate of	Knowledge	,
(Student's Signature) State of				,
State of	City/Cour		Knowledge On	
State ofbefore me,	City/Cour	nty of	Knowledge	
State ofbefore me,	City/Coun personal Notary's Name)	nty of Ily appeared, on	Knowledge On (Printed name of signer)	
State of	City/Coun personal Notary's Name) actory evidence of identification	nty of Ily appeared, on	Knowledge On	
State of before me, (I , and proved to me on basis of satisfa To be the above-named person who	City/Coun personal Notary's Name) actory evidence of identifications signed the foregoing instrume	nty of Ily appeared, on (Tyent.	(Printed name of signer) //pe of government-issued photo ID provided)	
State of	City/Coun personal Notary's Name) actory evidence of identification signed the foregoing instrume	nty of Ily appeared, on (Tyent.	(Printed name of signer) /pe of government-issued photo ID provided)	
State of before me, (I , and proved to me on basis of satisfa To be the above-named person who satisfa WITNESS my hand and official seal (Seal)	City/Coun personal Notary's Name) actory evidence of identification signed the foregoing instrume (Not	nty of Illy appeared, on (Ty ent. tary Signature)	(Printed name of signer) /pe of government-issued photo ID provided)	Expires)

Spouse's Signature (optional)

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.

Date

Revision Date: March 1, 2016

Student's Signature