2015-2016 Verification Worksheet

Dependent Student - University of Dubuque - Standard (V1)

5Your 2014-2016 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 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. [Dependent	Student's	Information
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Student's Last Name	Student's First Name	Student's M.I.	Student's SSN
Student's Street Address (i	nclude apt. #)		Student's Date of Birth
City	State	Zip Code	Student's E-Mail Address
Student's Home Phone Nu	mber (include Area Code)		Student's Alternative or Cell Phone Number

B. Dependent Student's Family Information

List below the people in your **parent(s) household**. INCLUDE:

- Yourself and your parent(s) or step-parent(s) (whomever you live with)
- Your parent(s) other children if your parent(s) will provide more than half of their 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 they do not live with your parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2016.

Include the name of the college for any household member, **escluding parents**, 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, 2015, and June 30, 2016. *If more space is needed, attach a separate page with the student's name and Social Security Number at the top.*

FULL NAME	AGE	RELATIONSHIP	COLLEGE ATTENDING in 2015-2016	WILL BE ENROLLED at LEAST HALF TIME? Y/N
		(SELF)		

Student Name:	Student ID Number:
C: STUDENT INCOME INFORMATION to BE VERIFIED: (Plea instructions.)	se check the applicable boxes and then follow the corresponding
STUDENT filed taxes in 2014: STUDENT did not file taxes, but did earn wages from working: STUDENT was not employed and had no income earned from work in 20	YES (complete Option A below) TES (complete Option B below) YES (proceed to Section D - Parent Information)
OPTION A: The best way to verify income is by using the IRS Data R has not already used the tool, go to www.FAFSA.gov , log in to the st navigate to the Financial Information section of the form. From there, fuse the IRS Data Retrieval Tool to transfer 2014 IRS income tax information filed, you must wait up to two weeks (for electronic filers) and up access the Data Retrieval Tool. If you need more information about whe aid administrator.	tudent's FAFSA record, select "Make FAFSA Corrections," and follow the instructions to determine if the student is eligible to nation into the student's FAFSA. NOTE: Once your taxes have p to eight weeks for paper IRS tax return filers before you can
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Check the box that applies: used the Data Retrieval 1	ool (date used) will use the Data Retrieval Tool
IRS Tax Return Transcript	is attached will send IRS Tax Return Transcript later
OPTION B: List all names of employers and the amount earned for ea	ach job. PLEASE ATTACH the W2s supporting this information.
Employer's Name	2014 Wages Earned
D. PARENT INCOME INFORMATION to BE VERIFIED: (Please instructions.)	e check the applicable boxes and follow the corresponding
PARENT filed taxes in 2014: PARENT did not file taxes, but did earn wages from working: PARENT was not employed and had no income earned from work in 202	YES (complete Option A below) YES (complete Option B below) YES (proceed to Section E on following page)
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						Student ID Nun		
•	SO	URCES OF INCOME	FOR LIVING EXP	PENSES				
	 Complete this section if the student's parent's did not file taxes AND did not have any earned income in 2013. 							
		Name of Federa	ıl/State Assistar	nce Program Y	ou are	Amour	nt of Aid Received in	
		Re	eceiving Assista	nce From			2014	
F.	PA	PARENT'S OTHER INFORMATION TO BE VERIFIED						
	 Complete this section if someone in the student's parent's household (listed in Section B) received benefits from the Supplemental Nutrition Assistance Program (SNAP) (formerly known as food stamps) any time during the 2013 or 2014 calendar years. 							
	One of the persons listed in Section B of this worksheet 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.							
	2.	One (or both) of the	student's parents	listed in Section	n D of thic w	orksheet paid child	sunnort in	
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