2015-2016 Verification Worksheet

Independent Student – University of Dubuque – Standard (V1)

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 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 Inforn	nation
---------------------------------	--------

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. 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, 2015 through June 30, 2016, or if the child would be required to provide your 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 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, 2016.

Include the name of the college for any household member who will be enrolled, <u>at least half time</u> 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)		

YES (complete Option A) YES (complete Option B) YES (proceed to Section D below) I that is part of FAFSA on the Web. If sudent's FAFSA record, select "Make from there, follow the instructions to 014 IRS income tax information into two weeks (for electronic filers) and a Retrieval Tool. If you need more all aid administrator. The wand print off an official IRS Tax Return The will use the Data Retrieval Tool will send IRS Tax Return Transcript later The ATTACH the W2s supporting this 2014 Wages Earned
YES (complete Option B) YES (proceed to Section D below) I that is part of FAFSA on the Web. If sudent's FAFSA record, select "Make from there, follow the instructions to 014 IRS income tax information into two weeks (for electronic filers) and a Retrieval Tool. If you need more all aid administrator. The ward print off an official IRS Tax Return We and print off an official IRS Tax Return We will use the Data Retrieval Tool Will send IRS Tax Return Transcript later ASE ATTACH the W2s supporting this
tudent's FAFSA record, select "Make From there, follow the instructions to 014 IRS income tax information into two weeks (for electronic filers) and a Retrieval Tool. If you need more all aid administrator. The property and print off an official IRS Tax Return will use the Data Retrieval Tool will send IRS Tax Return Transcript later The ASE ATTACH the W2s supporting this
two weeks (for electronic filers) and a Retrieval Tool. If you need more all aid administrator. The property and print off an official IRS Tax Return The property and print off an official IRS Tax Return The property and print off an official IRS Tax Return The property and print off an official IRS Tax Return The property and print official IRS Tax Return Transcript later The property and print of the print of the property and print of the print of
d) will use the Data Retrieval Too _ will send IRS Tax Return Transcript later SE ATTACH the W2s supporting this
_ will send IRS Tax Return Transcript later
SE ATTACH the W2s supporting this
2011 10 4560 2411164
ny earned income in 2014. Amount of Aid Received in 2014
?

F.	INDEPENDENT STUDENT'S OTHER INFORMATION TO BE VERIFIED									
	1.	1. Complete this section if someone in the student'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.	2. Either I, or if married my spouse who is listed in Section B of this worksheet, paid child support in 2014. I have 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, I 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 Social Security Number at the top.								
Nar		f Person Who Paid hild Support	Name of Person to V Child Support was			nild for Whom t Was Paid	Amount of Child Suppo	rt		
		ппи зиррог с	Ciliu Support was	raiu	Зиррог	t was raiu	Faiu III 2014			
G.	I certify that all of the information reported on it is complete and correct. The student must sign and date this worksheet. If married, the spouse's signature is optional. NOTE: If e-signing, simply type your name an									
	last 4-digits of your social security number and return it to us via e-mail; otherwise, print this out, sign and date it, then either fax it or mail it back to us (fax/address listed below).									
	St	Student's Signature Last 4-digits		of SS# Date						
	Sp	oouse's Signature	e Last 4-digits		of SS# Date					
		SI	JBMIT this workshe	et to t	ne Financial	Planning Office	e.			
				-	of Dubuque ncial Plannir	ng				

______ Student ID Number: ____

Student Name: ___

PH: (563)589-3170 FAX: (563)589-3690

2000 University Ave. Dubuque, IA 52001

Email: finaid@dbq.edu