

2018-2019 Verification Worksheet

Independent Student – University of Dubuque (V4/V5)

Your 2018-2019 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 INFORMATION

Student’s Last Name	Student’s First Name	Student’s M.I.	Student’s SSN
Student’s Street Address (include apt. #)			Student’s Date of Birth
City	State	Zip Code	Student’s E-Mail Address
Student’s Home Phone Number (include Area Code)			Student’s Alternative or Cell Phone Number

B. INDEPENDENT STUDENT’S FAMILY INFORMATION

WHO TO INCLUDE IN THIS SECTION:

- **Yourself.**
- Your spouse, if you are married
- Your children, if any, if you will provide more than half of their support from July 1, 2018 through June 30, 2019, or if the child would be required to provide your information if they were completing a FAFSA for 2018-2019. 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, 2019.

Include the name of the college for any household member 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, 2018, and June 30, 2019. *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 2018-2019	ENROLLED AT LEAST HALF TIME IN 2018-2019? Y/N
		(SELF)	University of Dubuque	

Student Name: _____ Student ID Number: _____

C. INDEPENDENT STUDENT’S INCOME INFORMATION to BE VERIFIED

Check the applicable box and then follow the corresponding instructions.

- STUDENT filed taxes in 2016. Complete Option A.
- STUDENT was not required to file taxes, but did earn wages from working in 2016. Complete Option B & C.
- STUDENT was not required to file taxes, was not employed, and had no income earned from work in 2016. Complete Option C.

OPTION A: The best way to verify income is by using the **IRS Data Retrieval Tool** that is part of FAFSA on the Web. If the student has not already used the tool, go to www.FAFSA.gov, log in to the student’s FAFSA record, select “Make FAFSA Corrections,” and navigate to the Financial Information section of the form. From there, follow the instructions to determine if the student is eligible to use the IRS Data Retrieval Tool to transfer 2016 IRS income tax information into the student’s FAFSA.

If you are unable to use the IRS Data Retrieval Tool, then you must go to www.irs.gov and print an official IRS Tax Return Transcript. (**NOTE:** There is a Tax Account Transcript, but we cannot use that form.)

Check the box that applies:

- Used the Data Retrieval Tool (date used _____)
- Will use the Data Retrieval Tool
- IRS Tax Return Transcript is attached
- Will send IRS Tax Return Transcript later

OPTION B: Only complete this section if you did not file taxes. List all names of employers and the amount earned for each job. Attach the 2016 W2s supporting this information.

Employer’s Name	Student or Spouse’s Employer?	2016 Wages Earned	W2 Attached
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

OPTION C: Provide documentation such as a “Verification of Non-Filing Letter” from the IRS or other relevant tax authority dated on or after October 1, 2017 that indicates a 2016 IRS income tax return was not filed with the IRS or other relevant tax authority. A “Verification of Non-Filing Letter” can be obtained at www.irs.gov.

D. STUDENT’S HIGH SCHOOL COMPLETION STATUS

Please check the option that applies to the incoming student regarding their education status prior to attending college. This documentation is part of the admissions process at the university, so there is no need to attach it here. If additional documentation is required, your financial aid office will notify you.

- _____ High school diploma or high school transcript including graduation date.
- _____ Official documentation from high school counselor stating your graduation date and reason why high school diploma/transcript is unavailable.
- _____ General Education Development (GED) Certificate.
- _____ State certificate stating you have passed a State-authorized examination recognized as equivalent to diploma.
- _____ Homeschooled student, w/ a transcript or equivalent, signed by parent or guardian , listing secondary school courses you have completed and documentation that you have successfully completed secondary school education.
- _____ Homeschooled with a secondary school completion credential provided under State law.
- _____ Completed a two-year program (ex. Associate’s degree) acceptable for full credit toward a bachelor’s degree.

Student Name: _____ Student ID Number: _____

E. DOCUMENTATION OF IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE

In order to complete the verification process, the student must appear in person at the postsecondary educational institution to verify his or her identity by presenting an unexpired valid government-issued photo identification, such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

If the student is unable to appear in person at the postsecondary educational institution to verify his or her identity, the student must provide to the institution a copy of the unexpired valid government-issued photo identification that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and the original Statement of Educational Purpose provided below, which must be notarized.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I _____ am the individual signing this Statement of Educational Purpose and that the
(Print Student's Name)

Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending the University of Dubuque for 2018-2019.

Student's Signature

Date

Student ID Number

Financial Administrator's Signature

Date

NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT

Do not fax or email this to the University of Dubuque. Original signatures are required.

State of _____

City/County of _____ / _____

On _____, before me, _____, personally appeared, _____
(Date) (Notary's Name) (Student's Name)

and proved to me on the basis of satisfactory evidence of identification _____ to be the
(Type of unexpired valid government-issued photo identification provided)
above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

Notary Signature

[SEAL]

My commission expires on

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

F. CERTIFICATION AND SIGNATURES

I certify that all of the information reported on this worksheet is complete and correct. **The student must sign and date this worksheet. If married, the spouse's signature is optional. Due to the need for original signatures, this form cannot be faxed or emailed.** Please mail it to the address below.

Student's Signature

Date

Spouse's Signature

Date

Submit this worksheet to:

**University of Dubuque - Office of Financial Planning – Attn: Melissa Schmitt - 2000 University Ave. - Dubuque, IA 52001
Phone: (563)589-3169 Fax: (563) 589-3690 Email: mschmitt@dbq.edu**