



2017–2018 Verification Worksheet Independent Student – V1

Your 2017–2018 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. To verify that you provided correct information, the Office of Financial Aid 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 Office of Financial Aid. Additional information may be requested at a later date.

A. Independent Student’s Information

Student’s Last Name	Student’s First Name	Student’s M.I.	Student’s ID (J#)
Student’s Street Address (include apt. no.)		Student’s Phone Number (include area code)	
City	State	Zip Code	Student’s Email Address

B. Independent Student’s Family Information

1. List below the people in your household. Include:
 - Yourself and your spouse (if you are married).
 - The student’s or spouse’s children if the student or spouse will provide more than half of their support from July 1, 2017 through June 30, 2018, even if the child(ren) 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 their support, and will continue to provide more than half of their support from July 1, 2017 through June 30, 2018.

2. Of the household members listed below, please indicate if they are or will be enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution from July 1, 2017 through June 30, 2018, and include the name of the college if applicable. We may require additional documentation if we have reason to believe that the information regarding household members enrolled in eligible postsecondary educational institutions is inaccurate. If more space is needed, provide a separate page with the student’s name and ID number and attach it to this document.

Full Name	Age	Relationship to the student	Name of the College	Will be Enrolled at Least Half Time (Yes or No)
		<i>Self</i>	American Institute of Interior Design	

Student's Name: _____

ID# _____

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C. Independent Student's Tax Return Filing Status

1. Check the **ONE** box that applies for the independent student and their spouse if married:

Student and/or spouse Did work and Did file a U.S. Income Tax Return for 2015 - You must verify your income in one of these two ways:

- Use the IRS Data Retrieval Tool – return to www.fafsa.gov and transfer your income from the IRS onto the FAFSA, or
- Submit a “Tax Return Transcript” (Do Not request the IRS Tax **Account** Transcript). You can obtain this at <https://www.irs.gov/individuals/get-transcript> or by calling 1-800-908-9946. If student and the spouse filed taxes as married but separate, you must submit a tax transcript for both.

Student and/or spouse Did Not work and Did Not file taxes for 2015. You must provide documentation from the IRS dated on or after October 1, 2016 that indicates a 2015 IRS income tax return was not filed. A confirmation of non-filing can be obtained from the IRS using form 4506-T and checking box 7 (Allow at least 10 business days to process your request), or by calling 1-800-908-9946. If the student and spouse, did not work and did not file taxes for 2015 you must provide confirmation of non-filing for both. Note: If you and your spouse, did not earn income from work in 2015, you must complete Section D of this form.

Student and or spouse Did Work but Was Not Required to file a tax return in 2015. Fill in this table and submit a copy of the W-2 you received from each employer. If you did not keep a copy of your and your spouse's W-2's, you should obtain another copy from your employer or obtain a Wage and Income Transcript from the IRS. To obtain a copy(s) from the IRS go to: <https://www.irs.gov/individuals/get-transcript> or by calling 1-800-908-9946.

Income Source	Amount Earned in 2015
<i>(Example) ABC's Auto Body Shop</i>	
Total Earned From Work: \$	

If you and/or your spouse cannot provide a copy of your W-2 form(s) or obtain Wage and Income Transcript(s) from the IRS please explain below the reason why it cannot be provided.

Student's Name: _____

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D. Untaxed Income, Benefits, and Resources - This section should be completed to help clarify how you were able to provide for housing, food and utility bills during 2015. Note: If you checked "Student and or spouse, if married Did Not work and Did Not file taxes for 2015" in Section C, you *must* complete this section.

1. Did any member listed in your household (under Section B) receive any of the following for the 2015 year? Additional documentation may be requested to verify receipt of these benefits/resources in 2015.

SNAP (formerly known as Food Stamps)	YES	NO
TANF (Cash Assistance)	YES	NO
Social Security Benefits	YES	NO
Subsidized Housing Income	YES	NO
Workers' Compensation	YES	NO

OTHER (i.e. unemployment compensation, child support, spousal support, etc.) Please list below.

2. If applicable, please check the option(s) below if you and/or your spouse (if married) received cash support or in-kind support from relatives and/or friends to help provide for your family's needs in 2015.

I and/or my spouse received cash support from an individual, paid to me/us, or on my behalf, for food, housing or living expenses in 2015. Report any cash support received. Also report any money paid to someone else on your behalf (example: If a friend or relative pays bills that are in your name, report that amount). Amount received may not be Zero.

Amount received in 2015: \$ _____

Name and Relationship of the person(s) who paid for expenses: _____

Telephone Number: _____

I and/or my spouse received in-kind support from an individual in 2015. In kind support is other than money, for example, friends or relatives giving you food or letting you live rent-free.

Number of Months support received in 2015: _____

Name and Relationship of the person(s) who assisted you: _____

Telephone Number: _____


Student's Name: _____


ID# _____

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E. Certification and Signatures

By signing this worksheet, you certify that all information reported on this worksheet is complete and correct.

Student's Name and Signature  _____
Date

Spouse's Name and Signature (optional)  _____
Date

WARNING: *If you are the student, by signing the certification, you certify that all of the information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide information that will verify the accuracy of your completed worksheet. If you sign any document related to the federal student aid programs electronically using a FSA ID, you certify that you are the person identified by the FSA ID and have not disclosed that FSA ID to anyone else. If you purposely give false or misleading information, you may be fined up to \$20,000, sent to prison, or both.*