

Office of Financial Aid 2016 – 2017 Verification Worksheet

Federal Student Aid Programs

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 (Department of Education) may ask you to confirm the information you and your parents reported on your FAFSA.

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information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. Warning: if you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

To verify that you provided correct information, financial aid administrators at Bowie State University will compare your FAFSA with the

A. Student's Information

Student's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number	
Student's Street Address (include apt. no.)			Student's Date of Birth	
City	State	Zip Code	Student's Email Address	

B. Family Information

Dependent Students - Dependent Student's Family Information

List the people in your parent(s)' household include:

- (A) Yourself and your parent (s) (including a stepparent) even if you don't live with your parent(s);
- (B) Your parent(s)' other children, if your parent(s) will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the other children would be required to provide parental information if they were completing a FAFSA for 2016–2017. Include children who meet either of these standards, even if they do not live with your parent(s);
- (C) 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, 2017.

Independent Students - Independent Student's Family Information

List below the people in your household, include:

- (A) Yourself (B) Your spouse, if you are married.
- (C) Your children, if any, if you will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the child would be required to provide your information if they were completing a FAFSA for 2016–2017. Include children who meet either of these standards, even if they do not live with you.
- (D) 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, 2017.

Include the name of the college for any household member, excluding parent(s) 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, 2016, and June 30, 2017. *If more space is needed, attach a separate page with your name and Social Security Number at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
		Self		

C. Income Information to Be Verified

Instructions : Complete this section if you, the student, and /or student's way to verify income is by using the IRS Data Retrieval Tool that is part of I	-	income tax return with the IRS. The best				
	The student (and, if married, my spouse's) and /or my parent(s), <u>has used</u> the IRS Data Retrieval Tool in FAFSA on the Web to transfer) 2015 IRS income information into my FAFSA, either on the initial FAFSA or when making a correction to the FAFSA.					
	The student (and, if married, my spouse's) /or my parent (s), <u>has not yet used</u> the IRS Data Retrieval Tool, but I will use the tool to transfer my 2015 IRS income information into my FAFSA once I have filed my 2015 IRS tax return.					
The student (and, if married, my spouse's) and/or my parent (s), am <u>unable or choose not to</u> use the IRS Data Retrieval Tool in FAFSA on the Web, and I will submit to the school 2015 IRS tax return transcript(s) —not photocopies of the income tax return. <i>Check here if an IRS tax return transcript(s) is attached to this worksheet.</i>						
Important Note: To order a TAX RETURN transcript, call the IRS at 1-800-908-9946 or visit the www.irs.gov . If student (or your spouse, if married) and/or parent (s) filed, or will file, an amended 2015 IRS tax return, you must submit a copy of the 1040X.						
TAX RETURN NONFILERS —Complete this section if the student and/or parent, will not file and is <u>not required</u> to file a 2015 income tax return with the IRS.						
Check the box that applies:						
The student (and, if married, my spouse's) /or my parent (s) was not employed and had no income earned from work in 2015.						
The student (and, if married, my spouse's) /or my parent (s) was employed in 2015 and has listed below the names of all the student's employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is attached. Attach copies of all 2015 IRS W-2 forms issued to the student by employers. List every employer even if they did not issue an IRS W-2 form. If more						
space is needed, attach a separate page with the student's no	ame and Social Security Number	at the top.				
Employer's Name	2015 Amount Earned	IRS W-2 Attached?				
Suzy's Auto Body Shop (example)	\$2,000.00(example)	Yes(example)				
D. Other Untaxed Income						
List any untaxed income for ANY member of the household that is not reported elsewhere on this form (i.e. workers' compensation, disability, black lung benefits, untaxed portions of health savings accounts from IRS form 1040 line 25, railroad retirement benefits, etc.) Do not include: student aid, earned income credit, additional child tax credit, TANF, untaxed social security benefits, SSI, WIA, combat pay,						
benefits from flexible spending arrangements, foreign income exclusion or credit for federal tax on special fuels.						

Name of Person Who had Untaxed Income	Type of Untaxed Income Received in 2015	Student Amount	Spouse or Parent Amount
Marty Jones(example)	Money received or paid on the student and/or parents behalf	\$2000	\$6,000.00
	Payments to tax-deferred pension and savings plan		
	Housing, food, and other living allowances paid to members of the military or clergy		
	Veterans non-educational benefits		
	Money received or paid on the student and/or parents behalf		
	Other untaxed income (please explain)		

E. Other Information to Be Verified

1.	Do you or someone listed in Sect food stamps during 2014 or 2015	ion B receive benefits from the Supplementa?	al Nutrition Assistance Program or SN	JAP formerly known as		
	Yes No * If yes, ple	ase provide documentation for SNAP ber	nefits received during 2014 and/ or 2	2015.		
2.	Complete this section if you, (and	lete this section if you, (and, if married, my spouse's) and /or your parent (s) paid child support in 2015. Submit Documentation.				
	additional documentation su	o believe that the information regard ch as: a signed statement from the indi copies of child support payment check	ividual receiving the child suppor	certifying the amoun		
	Name of Person Who Paid Child	Name of Person to Whom Child Support	Name of Child for Whom Support	Amount of Child		
	Support Marty Jones(example)	was Paid to Chris Smith	Was Paid Terry Jones	Support Paid in 2015 \$6,000.00		
F. Ce	rtification and Signature					
	I certify that all of the informati married, the spouse's signature	on reported on this worksheet is complete is optional.	e and correct. The student must sign	this worksheet. If		
Studer	nt's Signature:		Date:			
Parent		Students Only)	Date:			