

Financial Aid 2016-2017

V6 Independent Household Resources Verification Worksheet

What Does Verification Mean?

Verification is the process used to check the accuracy of information submitted by students on their financial aid application. The Federal Processor chooses student applications for verification at random through computer edits.

The U.S. Department of Education requires that colleges check the accuracy of the information provided on the 2016-2017 Free Application for Federal Student Aid (FAFSA) or the Renewal Application. We must verify this information before you are awarded financial aid. If there are differences between your FAFSA and this information (including your federal tax return), we will update your application and recalculate your eligibility.

****PROCESSING OF YOUR AID HAS STOPPED UNTIL THIS FORM AND REQUIRED DOCUMENTS ARE RETURNED****

A. Student Information

| | | | |
|----------------------------|------------|----------------|----------------------------------|
| Last Name | First Name | M.I. | SSN |
| Address (include apt. no.) | | E-mail Address | Date of Birth |
| City | State | ZIP Code | Phone Number (include area code) |

B. Family Information

List the people in your household, including:

- Yourself, and your spouse if you have one, and;
- Your children, if you will provide more than half of their support from July 1, 2016 through June 30, 2017, even if they do not live with you, and;
- 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 from July 1, 2016 through June 30, 2017.

Include the name of the college for any household member, who will be attending at least half-time between July 1, 2016 and June 30, 2017, and will be enrolled in a degree, diploma, or certificate program. Attach a separate page, if needed.

| Full Name of Family Member | Age | Relationship to Student | College Name (if attending) |
|------------------------------|-----|-------------------------|-----------------------------|
| <i>Example: Martha Jones</i> | 24 | Wife | |
| | | Student/Self | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Student's Taxes (Check only one box below.)

- I have used the IRS Data Retrieval Tool in FAFSA on the Web to transfer 2015 IRS income tax return information into my FAFSA.
- I am unable or choose not to use the IRS Data Retrieval Tool and am attaching a **2015 IRS tax return transcript**.
A FREE IRS tax return transcript can be requested online at www.irs.gov, by calling 1-800-908-9946, or by mailing or faxing the paper Form 4506T. **NOTE:** If you have one of the following unusual circumstances, please contact our office for acceptable documentation for verification of tax and income information: (1) filed an amended IRS income tax return; (2) was a victim of IRS identity theft; (3) granted a filing extension by the IRS; or (4) filed non-IRS income tax return.
- I will not file and am not required to file a 2015 U.S. income tax return. List below your employer(s) and any other sources of income received in 2015. **(Must submit W-2 forms or other earning statements for all sources of income reported below.)**

| Sources | 2015 Income |
|---------|-------------|
| | \$ |
| | \$ |

Spouse's Taxes (Check only one box below.)

- I have used the IRS Data Retrieval Tool in FAFSA on the Web to transfer 2015 IRS income tax return information into the FAFSA.
- I am unable or choose not to use the IRS Data Retrieval Tool and am attaching a **2015 IRS tax return transcript**.
A FREE IRS tax return transcript can be requested online at www.irs.gov, by calling 1-800-908-9946, or by mailing or faxing the paper Form 4506T. **NOTE:** If you have one of the following unusual circumstances, please contact our office for acceptable documentation for verification of tax and income information: (1) filed an amended IRS income tax return; (2) were victims of IRS identity theft; (3) granted a filing extension by the IRS; or (4) filed non-IRS income tax return.
- I will not file and am not required to file a 2015 U.S. income tax return. List below your employer(s) and any other sources of income received in 2015. **(Must submit W-2 forms or other earning statements for all sources of income reported below.)**

| Sources | 2015 Income |
|---------|-------------|
| | \$ |
| | \$ |

D. Student's and Spouse's Other Income

****COMPLETE THE SECTION BELOW ONLY IF INFORMATION WAS REPORTED ON YOUR FAFSA****

| | STUDENT | SPOUSE |
|---|-----------------------|-----------------------|
| Child support Paid in 2015. In the box to the right, list the total amount paid in 2015 for all children and provide: <ul style="list-style-type: none"> • name(s) of the payer(s) _____ • name(s) of the recipient(s) _____ • name(s) of the child(ren) supported _____ <i>Note: If we have reason to believe that the information regarding child support paid is inaccurate, you will be required to submit supporting documentation.</i> | \$ | \$ |
| Did anyone in the household (listed in Section B) receive benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2013 or 2015 calendar years? Please indicate YES or NO. <i>Documentation may be requested by the school at a later date, if needed.</i> | Yes _____ No _____ | Yes _____ No _____ |

If any item does not apply, enter "N/A" for Not Applicable where a response is requested, or enter 0 in an area where an amount is requested. Answer each question below as it applies to **you and your spouse (if married.)**

To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2015, multiply that amount by the number of months in 2015 you paid or received it. If you did not pay or receive the same amount each month in 2015, add together the amounts you paid or received each month.

If more space is needed, provide a separate page with your name and student ID number at the top.

1. Payments to tax-deferred pension and retirement savings

List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans (e.g. 401(k) or 403(b) plans) including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12d with codes D, E, F, G, H, and S.

| Name of Person Who Made the Payment | Total Amount Paid in 2015 |
|-------------------------------------|---------------------------|
| | |
| | |
| | |
| | |

2. Child support received

List the amount of any child support received in 2015 for ALL children listed in the household. Do not include foster care payments, adoption payments, or any amount that was court ordered but not actually paid.

| Name of Person Who Received the Support | Name of Child For Whom Support Was Received | Amount of Child Support Received in 2015 |
|---|---|--|
| | | |
| | | |
| | | |
| | | |

3. Housing, food, and other living allowances paid to members of the military, clergy, and others

Include cash payments and/or the cash value of benefits received. Do not include the value of on-base military housing or the value of a basic military allowance for housing.

| Name of Recipient | Type of Benefit Received | Amount of Benefit Received in 2015 |
|-------------------|--------------------------|------------------------------------|
| | | |
| | | |
| | | |
| | | |

4. Veterans non-education benefits

List the total amount of veterans non-education benefits received in 2015. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances. Do not include federal veteran's education benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, and Post-9/11 GI Bill.

| Name of Recipient | Type of Veterans Non-education Benefit | Amount of Benefit Received in 2015 |
|-------------------|--|------------------------------------|
| | | |
| | | |
| | | |
| | | |

5. Other untaxed income

List the amount of other untaxed income received that were not reported elsewhere on this form. Include untaxed income such as 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 financial aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

| Name of Recipient | Type of Other Untaxed Income | Amount of Other Untaxed Income Received in 2015 |
|-------------------|------------------------------|---|
| | | |
| | | |
| | | |
| | | |

6. Money received or paid on the student's behalf

List any cash support received or paid on your behalf (e.g. payment of your bills) and not reported elsewhere on this form.

For example, if someone is paying your rent, utility bills, etc. for you or gives cash, gift cards, etc., include the amount of that person's contributions. Amounts paid on your behalf also include any distributions to you from a 529 plan owned by someone other than you or your parents, such as grandparents, aunts, and uncles.

| Purpose: e.g. Cash, Rent, Books | Amount Received in 2015 | Source |
|---------------------------------|-------------------------|--------|
| | | |
| | | |
| | | |
| | | |

F. Sign this Worksheet: *Requires spouse signature, if married*

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and spouse (if married) must sign.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

MAIL/RETURN TO:
 Great Plains Technology Center
 Financial Aid Office
 4500 SW Lee Blvd
 Building 100 Room 107
 Lawton, OK 73505

 Student Signature (Required) Date

 Spouse Signature (Required If Married) Date