

VERIFICATION WORKSHEET VERSION 6

2016 - 2017

Due to the information you provided, your current (2016-2017) Free Application for Federal Student Aid (FAFSA) was selected for review in a process called *Verification*. Your FAFSA will be compared to the information on this worksheet along with any other required documents. If there are inconsistencies, your FAFSA information may need to be corrected. You and one parent must complete and sign this worksheet and submit it, along with all requested supporting documents, to the Student Financial Services Office. **This process takes 14 working business days once all requested documents are received.** To locate other forms, go to polk.edu; click on Admission & Aid, Financial Aid, and then Forms. If you have any questions about verification, you can contact the Student Financial Services Office via email, phone, or by visiting as soon as possible so that your financial aid will not be delayed.

Student Name (Please Print): _____ Student ID: _____

Contact Phone Number: _____ Term: _____

A. Dependency Status & Family Information: Please read below and fill in the boxes.
 Dependent- *I was required to provide parental data on the FAFSA (this includes students who do not live with their parents and DO NOT fall in the category of married, financially supporting a child at 51% for the 2015 year, serving in the military, a veteran, or a qualified unaccompanied youth.*

Please include in the table below:

- Parents/stepparents (*who provide more than half of your financial support*)
- Your parents'/stepparent's dependent children, if your parents/stepparent will provide more than half of their support, or if the children would be required to provide parent information when applying for financial aid.
- List other people only if they now live with **your parent(s)**, if your parent(s) provide more than half of their support **AND** will continue to provide it from July 1, 2016 through June 30, 2017.
- Include the name of the **college** attended by any household member who will be a student **at least half time** between July 1, 2016 and June 30, 2017 (*No abbreviations please*).

 Independent: *A student is considered independent if (s)he is married, has a child (s)he takes care of 51% of the year, serves in the military, or is a veteran or a qualified unaccompanied youth.*

- Spouse/ partner
- Your spouse/ partner's dependent child(ren) (s)he will provide more than half of the support, or if the child(ren) would be required to provide parent information when applying for financial aid.
- List other people only if they now live with **you and your spouse/partner**, if you and/or your spouse/partner provide more than half of their support **AND** will continue to provide it from July 1, 2016 through June 30, 2017.
- Include the name of the **college** attended by any household member who will be a student **at least half time** between July 1, 2016 and June 30, 2017.

First, Last Name	Age	Relationship	Full College Name
<i>Your name here:</i>		Self (<i>student</i>)	Polk State College

B. Income Information: Please check the box that applies.

The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web at www.FAFSA.gov. If the IRS Data Tool was not used, log into the student's FAFSA, click on "Make FAFSA Corrections," and

then click on the Financial Information section. Follow the instructions to determine if you're eligible to use the IRS Data Retrieval Tool to transfer your 2015 income tax information into your FAFSA. Please be advised that "Married Filing Separately" tax filers will not be able to use this tool.

Student/spouse (if married)

- I/We have used the IRS Data Retrieval Tool to transfer 2015 income tax return information (**Go to section D**)
- I/We **DID NOT** use the IRS Data Retrieval Tool. **Attach** a copy of your 2015 Tax Transcript (www.irs.gov); (**Go to section D**)
- I/We certify that I did not, will not, and am not required to file a 2015 Income Tax Return. (**Go to Section C**)
- I/We amended the 2015 tax return. Attach a signed **copy of the 1040X form and tax transcripts**. (**Go to section D**)
- I/We have filed an extension for the 2015 tax year and have attached a copy of IRS form 4868, approval of extension, signed IRS 1040 form, all W-2 forms, and if self-employed, a signed statement certifying AGI, U.S. income tax paid or 2015.
- I am/ We are a victim(s) of identity theft and have attached the Tax Return Database View Transcript (TRDBV) from IRS or any other IRS tax transcripts that include all of the income and tax information required to be verified, and a signed and dated statement from the tax filer. Contact IRS at 1-800-908-4490.

Parent(s)/Step-parents

- I/We have used the IRS Data Retrieval Tool to transfer 2015 income tax return information. (**Go to section D**)
- I/We **DID NOT** use the IRS Data Retrieval Tool. **Attach** a copy of your Tax Transcript (www.irs.gov); (**Go to section D**)
- I/We certify that I/We did not, will not, and am/are not required to file a 2015 U.S. Income Tax Return. (**Go to section C**)
- I/We amended the 2015 tax return. Attach a signed **copy of the 1040X form and tax transcripts**. (**Go to section D**)
- I/We have filed an extension for the 2015 tax year and have attached a copy of IRS form 4868, approval of extension, signed IRS 1040 form, all W-2 forms, and if self-employed, a signed statement certifying AGI, U.S. income tax paid for 2015.
- I am/We are victim(s) of identity theft and have attached the Tax Return Database View Transcript (TRDBV) from IRS or any other IRS tax transcripts that include all of the income and tax information required to be verified, and a signed and dated statement from the tax filer. Contact IRS at 1-800-908-4490.

C. Non-Tax Filers Income Information: Please read below and fill in the boxes.

- If you earned an income in 2015 and were not required to file a 2015 Income Tax Return. List your employer(s) below and any other income received.
- Attach all earning statements such as W-2 and/or 1099 forms. If you do not have a 1099 and worked for yourself, please provide us with a signed statement that includes the source of income, total taxes paid, and the Adjusted Gross Income.

If for any reason the information you provide is questionable, based on professional judgement, we may require additional documentation.

Do not leave this section blank. Please enter "N/A" for all that do not apply.

Employer Name/Source of Income <i>Note: in most situations, earning above \$10,150 requires a Tax Return to be filed.</i>	Are W-2 and/or 1099 forms attached?	Student 2015 Annual Amount	Parent(s)/Step-Parent 2015 Annual Amount
1.			
2.			
3.			
4.			

D. Supplemental Nutrition Assistance Program (SNAP) Benefits: Please do not leave blank.

*** Please select "Yes" and sign. If you select "No," do not sign. ***

Did any members of your stated household receive food stamps, State Supplemental Nutrition Assistance Program (SNAP), in 2014 and/or 2015?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If you answered "YES" above, you affirm that you and/or someone in the household received food stamp benefits during 2014 and/or 2015, the statement provided below must be signed by the student/ parent(s)/step-parents.

I, _____, affirm that benefits were received by household member(s) during the 2014 and/or 2015 (student/spouse or parent/step-parent) academic year.

E. Child Support Paid in 2015: Enter "N/A" to what does not apply. Please do not leave blank.

On your 2016-2017 FAFSA, you state that someone in your household paid child support due to a requirement in 2015. Please complete the following section. **If, for any reason, we believe the information you provide is vague, we may require additional documentation. Do not include support for children in your parent(s) household listed in section A.**

Child Support parent(s)/ step-parent PAID					
Name of child for whom support was paid?	Age of the child?	Name of person who paid child support in 2015? <i>(NOT You)</i>	Name of person receiving child support? <i>(NOT You)</i>	Annual amount of support paid in 2015?	Parent(s)/ Step-parent's Annual Amount Paid in 2015?

F. Untaxed Income: Please do not leave blank.

Even if the student and parent(s)/step-parent fall under the above sections, complete this section entirely (attach all relevant W-2 and/or 1099 forms). If you do not have a 1099 and have not worked, please provide us with a signed statement that includes the source of your income, total tax paid, and the Adjusted Gross Income.

Sources of Untaxed Income	Student 2015 Amount	Parent(s)/Step-parent 2015 Amount
Do you have IRA Distribution from your IRS form 1040 or 1040A rollover amount?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have pension distribution from your IRS form 1040 or 1040A rollover amount?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

Other untaxed income or benefits not reported on this form. List income in section C of this form.	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Payments to tax-deferred pensions and retirement saving plans (paid directly or withheld from earnings). This information is located in the W-2 form in boxes 12a through 12d, codes D, E, F, G, H, and S. Do not include amounts reported in code DD.	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____
Child support received for all children. Do not include foster care or adoption payments.	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____
Housing, food, and other living expenses paid to members of the military, clergy, or others (include cash payments and cash value of benefits). Do not include on-base military housing or basic military allowance for housing.	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____
Education credits	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____
Veterans Non-education Benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Education Work-Study allowances.	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____
Any other money paid or received on the student's behalf (e.g., bills) not reported elsewhere on this form. This includes money that you received from a parent/person whose financial information is not reported on this form.	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____ Pd.____ Rcv'd.____	<input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____ Pd.____ Rcv'd.____

Additional Information needed:

G. The 2015 income information on your 2016-17 Free Application for Federal Student Aid (FAFSA) does not appear to be sufficient to support your reported household size. ***This worksheet will be returned to you for additional information if it is incomplete. We will email and/or call to alert you.***

Circle which of these benefits you receive:

TANF Section 8 Housing Social Security WIC Scholarship/other Financial Aid
 Medicare/Medicaid VA Non-educational benefits Other Income DCF/Foster care stipend
 Road to Independence Stipend

H. ***Provide a response for each box below addressing income received or earned from January 1, 2015 through December 31, 2015.*** Please provide all financial assistance you received for the year. Add an extra sheet if needed. Include all monies as well as any other financial support you received from family members, private and/or public agencies.

Please provide a response to ALL of the questions below. DO NOT LEAVE ANY QUESTION BLANK.
Note: If a monetary item does not apply to you, enter a "0". DO NOT LEAVE ANY BLANK SPACES.

STUDENT	INCOME SOURCES AND AMOUNTS IN 2015 (ANNUAL AMOUNTS ONLY)	PARENT/SPOUSE
\$	Earnings from work	\$
\$	Unemployment compensation	\$
\$	Child support received	\$
\$	Alimony received	\$
\$	Money received or paid on your behalf (for your bills or cash given to you for expenses)	\$
\$	Cash gifts	\$

