

VERIFICATION WORKSHEET VERSION 1

2015 - 2016

Your current (2015-2016) Free Application for Federal Student Aid (FAFSA) was selected for review in a process called *verification*. You and one parent (*if dependent*) must complete and sign this worksheet, attach any required documents, and submit the form along with any other additional information required by the Student Financial Services Office. Go to: polk.edu; click on Admission & Aid, Financial Aid, and then Forms.

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

Contact Phone Number: _____ Academic Year/Term: _____

A. Dependency Status & Family Information: Please check the box that applies.

- Dependent-** A student is considered dependent if he/she was required to provide parental data on the FAFSA. Please include in the table below:
- You and your 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 as part of your household only if they now live with **your parents, AND they** provide more than half of their support **AND** will continue to provide more than half their support from July 1, 2015 through June 30, 2016.
 - Provide** the name of the college for any household member who will be attending **at least half time** between July 1, 2015 and June 30, 2016.

- Independent-** A student is considered independent if he/she was not required to provide parental data on the FAFSA. Please include in the table below:
- You and your spouse, if married
 - Your dependent children, if you will provide more than half of their support
 - List other people as part of your household only if they now live with **you, AND you** provide more than half of their support **AND** will continue to provide more than half their support from July 1, 2015 through June 30, 2016.
 - Provide the name of the college for any household member who will be attending **at least half time** between July 1, 2015 and June 30, 2016.

Full Name	Age	Relationship	Full College Name
		Self (student)	Polk State College

*Attach additional sheet if necessary to include additional members of the household.

B. Income Information: Please check the box that applies.
Student (spouse, if married filed jointly)

- I/we have used the IRS Data Retrieval Tool at www.fafsa.gov; **skip to section D.**
- I/we **DID NOT** use the IRS Data Retrieval Tool. **Attach** a signed copy of the *IRS Tax Return Transcript* (www.irs.gov); **skip to section D.**
- I/we certify that I/we did not file, will not, and am/are not required to file a 2014 U.S. Income Tax Return. **GO to Section C.**

Parent(s) – If Dependent Student/Spouse (if filed separately)

- I/we have used the IRS Data Retrieval Tool at www.fafsa.gov; **skip to section D.**
- I/we **DID NOT** use the IRS Data Retrieval Tool. **Attach** a signed copy of the *IRS Tax Return Transcript* (www.irs.gov); **skip to section D.**
- I/we certify that I/we did not file will not, and am/are not required to file a 2014 U. S. Income Tax Return. **GO to Section C.**

