Verification Worksheet – DEPENDENT STUDENT ACADEMIC YEAR 2016-2017

Student Name:			
	(last)	(first)	(middle initial)
Last Four Digits	of SSN: XXX - XX	UW Student ID #:	

Your 2016-2017 FAFSA was selected for a review process called **Verification**. We will compare your FAFSA with the information on this worksheet, along with any other required documentation. If there are differences, then your FAFSA information may need to be corrected. You and at least one parent must complete and sign this worksheet, attach any required documentation and submit the information to our office for review. **We may request additional paperwork to complete this review and finalize your eligibility for financial aid.** If you have you and your parent(s)' 2015 tax return, 2015 W-2 forms and your current bank statements available, then completing the form will be much easier.

	HOUSEHOLD SIZE INFORMATION									
Parent(s): Please report your marital status as of the date the FAFSA was filed:										
	Never Married	_	Married/ Remarried		Divorced/ Separated		Widowed		Unmarried but living together	

Student: Please include everyone in your parent(s)' household even if you do not live with your parents. If your parent is remarried as of the date of the 2016-2017 FAFSA, also include the stepparent. If your parents are unmarried and living together, list both parents. List your parent(s)' other children if your parent(s) will provide more than half of their support from 7/1/2016-6/30/2017. Do not list foster children. Also, include any other people if they currently 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 6/30/2017. Include the name of the college for any household member (excluding parents) who will be enrolled at least half time in a degree program at a postsecondary educational institution any time between 7/1/2016-6/30/2017. Attach an additional sheet for more members, if needed.

Full Name of Household Member	Age	Relationship to Student	College Name	Enrolled at Least Half Time?
1.		Student	UW	N/A
2.		Parent 1 (include stepparent)	N/A	N/A
3.		Parent 2 (include stepparent)	N/A	N/A
4.				[] Yes or [] No
5.				[] Yes or [] No
6.				[] Yes or [] No
7.				[] Yes or [] No
8.				[] Yes or [] No
9.				[] Yes or [] No
10.				[] Yes or [] No

2015 TAX INFORMATION

Parent(s) and Student 2015 Tax Information: Please check the appropriate boxes in the table below and attach the requested documentation, if applicable. If you were a victim of IRS tax-related identity theft, if you filed an amended tax return (1040X) for 2015, or if you were granted a tax filing extension from the IRS for 2015, please contact our office for instructions on how to verify your tax information.

Parent	Student		
I filed a 2015 federal tax return.	☐ I filed a 2015 federal tax return.		
Attached is a copy of my 2015 IRS Tax Return Transcript. An IRS Tax Return Transcript can be requested online at: http://www.irs.gov/Individuals/Get-Transcript	Attached is a copy of my 2015 IRS Tax R Transcript. An IRS Tax Return Transcript be requested online at: http://www.irs.gov/Individuals/Get-Trans	can	
I filed a 2015 foreign tax return.	☐ I filed a 2015 foreign tax return.		
Attached is a signed copy of my foreign tax return and income statement(s) translated into English and converted into US Dollars.	Attached is a signed copy of my foreign t return and income statement(s) translate into English and converted into US Dollar	d	
I will not file a 2015 federal tax return.	☐ I will not file a 2015 federal tax return.		
☐ I worked in 2015, but I am not required to file a 2015 federal tax return.	 I worked in 2015, but I am not required t a 2015 federal tax return. 	o file	
 Please complete the Non-Tax Filer Income Information chart below and submit all 2015 W-2 forms. -OR- 	Please complete the Non-Tax Filer Information chart below and submit a 2015 W-2 formsOR-		
☐ I did not work in 2015 and will not file a 2015 federal tax return.	 I did not work in 2015 and will not file a 2 federal tax return. 	2015	

NON-TAX FILER INCOME INFORMATION

Non-Tax Filers: If you and/or your parent were not required to file a tax return as noted in the table above, but worked in 2015, list all employers and the amounts earned below. You must submit copies of your W-2 form(s) with this form. Please note that, if the IRS law requires you to file a federal tax return, we can take no further action on your application for federal student aid until you submit a 2015 IRS Tax Return Transcript to our office. You can visit www.irs.gov for the general 2015 tax filing requirements. (Tax filers do not need to complete the chart below.) Please list every employer, even if they did not issue a W-2 form. If more space is needed, attach a separate sheet with the student's UW Student ID#.

2015 Income	Employer Name	Wages/Earnings (Box 1 on W-2 form. If a W-2 form was not issued, list all earnings from the job.)
Parent 1 (as listed on FAFSA)		\$
Parent Name		\$
Parent 2 (as listed on FAFSA)		\$
Parent Name		\$
Chudant		\$
Student		\$

ADDITIONAL AND UNTAXED INCOME INFORMATION

Parent(s) and Student: Please answer the following questions. If any do not apply to your household, please enter zero, and do not leave any answers blank.

Parent(s)	Additional Financial Information	Student
\$	Education credits from IRS Form 1040-line 50 or Form 1040A-line 33 .	\$
\$	Taxable college grant or scholarship aid reported to the IRS in your adjusted gross income (reported as SCH on Line 7 of 1040 or 1040A and on line 1 of 1040EZ).	\$
\$	Taxable earnings from need based employment programs such as Federal Work Study and need based portions of fellowships & assistantships.	\$
\$	Combat or special combat pay (only enter the amount that was taxable and included in your adjusted gross income (AGI). Combat pay is reported on the W-2 form, Box 12, Code Q.	\$
\$	Earnings from work under a Cooperative Education Program offered by a college and/or university.	\$

Parent(s)	Untaxed Income	Student
\$	Payments to tax deferred and savings plans (paid directly or withheld from earnings), including but not limited to amounts reported on the W-2 Form in Boxes 12a-12d, Codes D, E, F, G, H and S. Do not include code DD.	\$
\$	IRA deductions & payments to self-employed SEP, SIMPLE, & KEOGH and other qualified plans from IRS Form 1040-lines 28+32 or Form 1040A-line 17.	\$
\$	Child Support RECEIVED for all children. Do not include foster care or adoption payments.	\$
\$	Tax exempt interest income from IRS Form 1040-line 8b or Form 1040A-line 8b.	\$
\$	Untaxed portions of pensions from IRS Form 1040-lines 15a minus 15b or Form 1040A-lines 11a minus 11b. Exclude rollovers. If negative, enter 0.	\$
\$	Untaxed portions of pensions from IRS Form 1040-lines 16a minus 16b or Form 1040A-lines 12a minus 12b. Exclude rollovers. If negative, enter 0.	\$
\$	Housing, food, and other living allowances paid to members of the military, clergy and others (including cash payments and cash value benefits). Do not include the value of on-base military housing or the value of basic military allowance for housing.	\$
\$	Veterans' non-education benefits such as Disability, Death Pension or Dependent & Indemnity Compensation (DIC) and/or VA Work Study allowances.	\$
\$	Other untaxed income not reported, such as workers' compensation, disability, untaxed portions of health savings accounts from IRS Form 1040-line 25, etc. Do not include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security Benefits, Social Security Income, Workforce Investment Act educational benefits, on-base military housing or military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion credit or federal tax on special fuels.	\$
\$ N/A	Money received or paid on your behalf (e.g., bills) not reported elsewhere on this form.	\$

CHILD SUPPORT PAID INFORMATION

Parent and/or Student: Please report ch of divorce, separation, or as a result of a leg support paid for children listed in the House page 1. Attach additional sheet for more ch	Total amount paid for all children in 2015:					
Support paid to:	\$					
For:	(child's name/age)					
For:	(child's name/age)	<u>.</u>				
For:	(child's name/age)					
	EANOE DECEIVED IN CO.	00.0045				
PUBLIC ASSIS	FANCE RECEIVED IN 2014	OR 2015				
Did your parent receive assistance through (Check all that apply and list annual amount receive						
□ Free/Reduced Lunch □ SSI: 9	\$ <u>00</u>	(Food Stamps): \$ <u>00</u>				
□ TANF: \$00 □ WIC:	\$ <u>00</u> □ N/A					
	CHECKITET					
	CHECKLIST					
Please verify the following steps have	been completed prior to sub	mitting:				
 Both my parent(s) and I have included or foreign tax documents. 						
☐ If I or my parent(s) are non-tax file	er(s), all copies of W-2s have bee	n included.				
☐ All sections of this form are comple	ted fully, there are no blank fi	elds and it is signed below.				
 Both my parent(s) and I underst requested. 	and that we may need to pro	vide additional information, if it is				
CEDILE	ICATION AND SIGNATURE	c				
I certify that all information provided complete to the best of my knowledge		documentation is true and				
Student Signature:	Date:					
Parent Name:						
Parent Signature:		Date:				
HOW	TO SUBMIT YOUR FORMS					
	Fax:	Email:				
Mail or Drop Off: Office of Student Financial Aid 105 Schmitz, Box 355880 1410 NE Campus Parkway Seattle, Washington 98195-5880	206.685.1338	emaii: osfa@uw.edu				