

2018–2019 Verification Worksheet

Independent Student

Your 2018–2019 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 may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

A. Independent 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
Student’s Home Phone Number (include area code)			Student’s Alternate or Cell Phone Number

B. Independent Student’s Family Information

List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2018, through June 30, 2019, or if the child would be required to provide your information if they were completing a FAFSA for 2018–2019. Include children who meet either of these standards, even if they do not live with you.
- 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, 2019.

Include the name of the college for any household member who will be enrolled at least half time, in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2018, and June 30, 2019. *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
<i>Marty Jones(example)</i>	<i>28</i>	<i>Wife</i>	<i>Central University</i>	<i>Yes</i>
		<i>Self</i>		

Student's Name: _____ SSN: _____

C. Independent Student's Income Information to Be Verified

1. TAX RETURN FILERS—**Important Note:** If you (or your spouse, if married) filed an amended 2016 IRS tax return, you must contact your financial aid administrator before completing this section.

Instructions: Complete this section if you, the student filed a 2016 income tax return with the IRS.

If you filed taxes, check ONE box that applies:

- I, the student, have used the IRS Data Retrieval Tool in FAFSA on the Web to transfer my (and, if married, my spouse's) 2016 IRS income information into my FAFSA on the initial FAFSA or when making a correction to FAFSA.
- I, the student, (and, if married, my spouse) have attached my 2016 IRS Tax Transcript to this worksheet. **A tax return is not acceptable documentation.**

2. TAX RETURN NONFILERS—Complete this section if you, the student (and, if married, your spouse), will not file and are not required to file a 2016 income tax return with the IRS.

If you did not file taxes, check ONE box that applies:

- The student (and, if married, the student's spouse) was not employed and had no income earned from work in 2016.
- The student (and/or the student's spouse if married) was employed in 2016 and has listed below the names of all employers, the amount earned from each employer in 2016, and whether an IRS W-2 form is attached. Attach copies of all 2016 W-2 forms issued to you (and, if married, to your spouse) by employers.

Employer's Name	2015 Amount Earned	IRS W-2 Attached?
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00</i>	<i>Yes</i>

D. Certification and Signature

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married, the spouse's signature is optional.

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

Student's Signature

Date

Spouse's Signature

Date

*Return completed form to: The Sage Colleges, Attn: Financial Aid Office, 65 First Street, Troy, NY 12180
Email: FVerification@sage.edu, (Fax 518-244-2460), Phone (Albany: 518-292-1783) (Troy: 518-244-4525)*

WE WILL RETURN ANY INCOMPLETE OR UNSIGNED FORMS FOR CORRECTION. IF YOU HAVE QUESTIONS PLEASE CALL FINANCIAL AID: Troy (518) 244-4525, Albany (518) 292-1783