

2018–2019 Verification Worksheet

Dependent 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 and your parents 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 and at least one parent 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. Dependent 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. Dependent Student’s Family Information

List below the people in your parent(s) household. Include:

- Yourself and your parent(s) (including a stepparent) even if you don’t live with your parent(s).
- Your parent(s)’ other children if your parent(s) will provide more than half of their support from July 1, 2018, through June 30, 2019, or if the other children would be required to provide parental 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 your parent(s).
- Other people if they now 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 June 30, 2019.

Include the name of the college for any household member, excluding your parent(s), 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 the student’s name and Social Security Number at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>	<i>Central University</i>	<i>Yes</i>
		<i>Self</i>		

C. Dependent Student's Income Information to Be Verified

1. TAX RETURN FILERS—**Important Note:** If the student filed an amended 2016 IRS tax return, the student must contact the financial aid administrator before completing this section.

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

If you filed taxes, check ONE box that applies:

- The student has used the IRS Data Retrieval Tool in FAFSA on the Web to retrieve and transfer 2016 IRS income information into the student's FAFSA on the initial FAFSA or when making a correction to the FAFSA.
- Student's 2016 IRS tax return transcript is attached to this worksheet. **A tax return is not acceptable documentation.**

2. TAX RETURN NONFILERS—complete this section if the student will not file and is 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 was not employed and had no income earned from work in 2016.
- The student was employed in 2016 and has listed below the names of all the student's employers, the amount earned from each employer in 2016, and whether an IRS W-2 form is attached. Attach copies of all 2016 IRS W-2 forms issued to the student by employers. *List every employer even if they did not issue an IRS W-2 form. If more space is needed, attach a separate page with the student's name and Social Security Number at the top.*

Employer's Name	2016 Amount Earned	IRS W-2 Attached?
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00(example)</i>	<i>Yes(example)</i>

D. Parent's Income Information to Be Verified—Note: If two parents were reported in Section B of this worksheet, the instructions and certifications below refer and apply to both parents.

1. TAX RETURN FILERS—**Important Note:** If the student's parent(s), filed, an amended 2016 IRS tax return the student's financial aid administrator must be contacted before completing this section.

Instructions: Complete this section if the student's parent(s) filed a 2016 income tax return with the IRS.

If you filed taxes, check ONE box that applies:

- The student's parent **has used** the IRS Data Retrieval Tool in FAFSA on the Web to transfer 2016 IRS income information into the student's FAFSA, either on the initial FAFSA or when making a correction to the FAFSA.
- The student's parent has attached a 2016 IRS Tax Transcript to this worksheet. **A tax return is not acceptable documentation.**

2. TAX RETURN NONFILERS—Complete this section if the student's parent(s) will not file and is not required to file a 2016 income tax return with the IRS.

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

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

Employer's Name	2016 Amount Earned	IRS W-2 Attached?
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00 (example)</i>	<i>Yes (example)</i>

E. Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must sign and date.

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

Parent's Signature

Date

Return completed form to: Russell Sage College, Attn: Financial Aid Office, 65 First Street, Troy, NY 12180

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