



# 2016-2017 Household Resources Verification Worksheet - Dependent Student

Mail to: Financial Aid Office 300 Fraser Purchase Road Latrobe PA 15650-2690. Fax 724-805-2953

Your 2016-2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called “Verification”. In this process, Saint Vincent College is required to compare information from your FAFSA with your and your parent(s)’ 2015 IRS Tax Return Transcripts and this form. If there are differences, your FAFSA information will be corrected and you will receive notification of such from the Department of Education in the form of an updated Student Aid Report. If the corrections indicate a change to your financial aid package you will also be notified of such via a revised award notification. **Federal aid cannot be awarded until the verification process has been completed.**

**What you need to do:**

- Complete and sign this Verification Worksheet – both you and at least one parent who filed the FAFSA.
- Download and print a copy of your/parents 2015 IRS Tax Return Transcripts from [www.irs.gov](http://www.irs.gov) or request a copy be mailed to you by calling 1-800-908-9946.  
*Please Note: Request the “IRS Tax RETURN Transcript” and not the “IRS Tax Account Transcript”.*
- Submit the completed Verification Worksheet, IRS Tax Return Transcripts, and any other documents SVC may request to the Financial Aid Office immediately to assure timely processing.

**A. Student Information Only**

Last Name	First Name	M.I.	Student ID	Last 4 of SSN
Address (permanent address, include apt. no.)			Date of Birth	
City	State	Zip Code	Telephone/Cell Number (include area code)	

**B. Family Information**

List the people in your parent(s)’ household between July 1, 2016 and June 30, 2017 including:

- Yourself, and your parent(s), (including a step-parent) 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, or if other children would be required to provide parental information if they were completing the FAFSA. Include children who meet either of these standards, even though 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, 2017.

Write the names of all household members in the area below. Also write in the name of the college for all household members excluding parents who will be attending college between July 1, 2016 and June 30, 2017. If more space is needed, please attach a separate page with the student’s name and Social Security Number at the top.

First and Last Name	Age	Relationship to Student	Last 4 digits of Social Security Number	College Attending for the 2016-2017 year if any	Full-time	Half-time	Less than Half-time
<b>Yourself</b>		<b>Self</b>		<b>SVC</b>			

**Indicate the *current* marital status for the parent(s) listed above in section B.**

Never married  Married/Remarried  Divorced/Separated  Widowed  Unmarried, and both parents living together

Date of Marital Status: \_\_\_ / \_\_\_

**C. Dependent Student's Income Information to Be Verified**

The student must complete this section. If the student files or will file an amended 2015 IRS Tax Return, contact the Financial Aid Office **before** completing this section.

- \_\_\_\_\_ Check here if the student has used the IRS Data Retrieval Tool in FAFSA. If you have successfully used the IRS Data Retrieval Tool, you do not need to submit a Tax Return Transcript.
- \_\_\_\_\_ Check here if the student is unable or chooses not to use the IRS Data Retrieval Tool in FAFSA, and will submit to the school 2015 IRS Tax Return Transcripts. **Go to [www.irs.gov](http://www.irs.gov), get transcript of your tax records, request a Tax Return Transcript**
- \_\_\_\_\_ Check here if the student did not work and had no income in 2015.
- \_\_\_\_\_ Check here if the student earned income but did not file and was not required to file. **Complete the next section.**

List all employers and income received in 2015. **If you worked but were not required to file or did not file, you must submit W-2's.** If more space is needed, please attach a separate page with the student's name and Social Security Number at the top.

Sources of Income	Amount of Income	
	\$	Provide W-2
	\$	Provide W-2

**D. Parent(s)' Income Information to Be Verified**

The parent must complete this section. If the parent files or will file an amended 2015 IRS Tax Return, contact the Financial Aid Office **before** completing this section.

- \_\_\_\_\_ Check here if the parent has used the IRS Data Retrieval Tool in FAFSA. If you have successfully used the IRS Data Retrieval Tool, you do not need to submit a Tax Return Transcript.
- \_\_\_\_\_ Check here if the parent is unable or chooses not to use the IRS Data Retrieval Tool in FAFSA, and will submit to the school 2015 IRS Tax Return Transcripts. **Go to [www.irs.gov](http://www.irs.gov), get transcript of your tax records, request a Tax Return Transcript**
- \_\_\_\_\_ Check here if neither parent worked and had no income in 2015.
- \_\_\_\_\_ Check here if parents earned income but did not file and were not required to file. **Complete the next section.**

List all employers and income received in 2015. **If parent(s) worked but were not required to file or did not file, W-2's must be submitted.** If more space is needed, please attach a separate page with the student's name and Social Security Number at the top.

Sources of Income	Amount of Income	
	\$	Provide W-2
	\$	Provide W-2

**E. Child Support Paid to Be Verified**

The parent must complete this section if either parent that is included in the household **paid** child support in 2015.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support was Paid	Amount of Child Support Paid in 2015

**F. Other information**

Did you (student) or a family member listed in Section B receive food stamps at any time during 2014 or 2015?

\_\_\_\_\_ No \_\_\_\_\_ Yes If you answered "Yes" you must attach documentation from the agency issuing the food stamps to confirm. Please print student name and ID number on the documentation before submitting.

**G. Verification of other untaxed income for 2015**

**Do not leave any section blank. If any item does not apply, enter N/A for not applicable.**

1. Payments to Tax-Deferred Pensions and Retirement Savings

List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans (e.g. 401(k) or 403(b) plans) including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12d with codes D, E, F, G, H, S.

Name of Person Who Made the Payment	Total Amount Paid in 2015

2. Child Support Received

List the actual amount of any child support received in 2015 for the children in your household. Do not include foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.

Name of Adult who Received the Support	Name of Child for Whom Support Was Received	Amount of Child Support Received in 2015

3. Housing, Food, & Other Living Allowances Paid to Members of Military, Clergy, and Others

Include cash payments and/or the cash value of benefits received. Do not include the value of on-base military housing or the value of a basic military allowance for housing.

Name of Recipient	Type of Benefit Received	Amount of Benefit Received in 2015

4. Veterans Non-Education Benefits

List the total amount of veterans non-education benefits received in 2015. Include disability, death pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances. Do not include federal veteran's education benefits such as: Montgomery GI 911 Bill, Dependents Education Assistance Program, VEAP Benefits, Post-9/11 GI Bill.

Name of Recipient	Type of Veterans Non-education Benefit	Amount of Benefit Received in 2015

5. Other Untaxed Income

List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS 1040 Line 25, Railroad Retirement Benefits, etc. Do not include any items reported or excluded in A-D above. In addition, do not include student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security Benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA), educational benefits, combat pay, benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Name of Recipient	Type of Other Untaxed Income	Amount of other Untaxed Income Received in 2015

6. Money Received or Paid on the Student's Behalf

List any money received or paid on the student's behalf (e.g. payment of student's bills) and not reported elsewhere on this form. Enter the total amount of cash support the student received in 2015. Include support from a parent whose information was *not* reported on the student's 2016-2017 FAFSA, but do not include support from a parent whose information was reported.

Purpose: e.g. Cash, Rent, Books	Amount Received in 2015	Source

**H. Sign this Worksheet** By my signature I certify that all of the information reported on it is complete and correct. The student and one parent must sign and date.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date