DEPENDENT

2018-2019 Verification Worksheet Federal Student Aid Programs

Your application was selected by the U.S. Dept. of Education for review in a process called "verification." WHAT YOU MUST DO BEFORE FINANCIAL AID CAN BE AWARDED TO YOU

- Complete all sections and sign the worksheet you and your spouse must sign the worksheet.
- Submit all required documents to the Office of Student Financial Aid.
- If you or your spouse did not file or are not required to file an IRS 1040, you and your spouse must affirm that you are not required to file an IRS 1040 and include a copy of 2016 W-2 Forms from all employers.

A. Student Information (Please Print or Type)

Last Name	First Name	M.I	. Banner ID Number
Address (include apt. #)	City	State	Zip Code
Date of Birth	E-Mail Address		Phone Number (Include Area Code)

B. Family Information

List the people in your household, include:

- You and your parents, even if you do not live with them (including stepparent).
- Your parents' other children, even if they do not live with your parents if (1) your parents will provide more than half of their support from July 1, 2018 through June 30, 2019; or (2) the children would be required to provide parental data when applying for FAFSA.
- 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 from July 1, 2018 through June 30, 2019.

Write the names of ALL household members. Also write in the name of the college for any family member who will be attending college at least half-time between July 1, 2018 and June 30, 2019, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	College Attending in 2018-19
		Self	SUNO

- C. <u>Income Tax Information</u> Please check the appropriate section below:
 - STUDENT INCOME - COMPLETE ONLY IF YOU USED THE IRS DATA RETRIEVAL TOOL
 ____I attest that I have used the IRS Data Retrieval Tool in FAFSA on the Web to transfer my 2016 IRS
 Income information into my FAFSA. I have not changed this information.
 - STUDENT -- COMPLETE ONLY IF YOU DID NOT USE THE IRS DATA RETRIEVAL TOOL

 ____I am unable/chose not to use the IRS Data Retrieval Tool in FAFSA on the Web. My 2016 IRS Tax

 Return Transcript is attached to this worksheet.
 - PARENT(S) INCOME - COMPLETE ONLY IF YOU USED THE IRS DATA RETRIEVAL TOOL
 ____ I attest that my parents have used the IRS Data Retrieval Tool in FAFSA on the Web to transfer 2016 IRS
 Income information into my FAFSA. This information has not been changed.

• PAR	ENT(S) COMPLETE ONLY IF YOU DID NOT USE THE IRS DATA RETRIEVAL TOO! My parent was unable/chose not to use the IRS Data Retrieval Tool in FAFSA on the My parent(s) 2016 IRS tax return transcript is attached to this worksheet.	<u>L</u> Web.
• <u>STU</u>	DENT – COMPLETE ONLY IF YOU WILL NOT FILE AND ARE NOT REQUIRED TO FILE AND ARE NOT FILE AND ARE N	
• PAR	ENT(S) COMPLETE ONLY IF YOU WILL NOT FILE AND ARE NOT REQUIRED TO I attest that I have not filed an IRS 1040 for 2016 and I am not required to file an IRS 2016. I have attached all of the W-2 forms I received for 2016.	FILE 1040 for
were received Applican	nal Income and non-tax filers must list any untaxed income received in 2016. Be sure to enter zeros L. Failure to complete this section will delay the processing of your verification. s with no taxable income, no earned income or no untaxed income will be required to sub C VERIFICATION FORM showing how living expenses were met.	
Student	Calendar Year 2016	Parent
	2016 Untaxed Income	
\$	Payments to tax-deferred pensions and savings plans (paid directly or withheld from earnings) including, but not limited to, amounts reported on W-2 Form Box 12a – 12d, codes D. E., F, G, H, and S	\$
\$	Untaxed portion of pensions.	\$
\$	Untaxed portion of IRA Distributions	\$
\$	Tax exempt interest income from 1040 or 1040A line 8b	\$
\$	Education credits from 1040 or 1040A.	\$
\$	Child Support Paid because of divorce or separation or as a result of a legal requirement. List the names of the children receiving the child support	\$
	The person's name to whom the support is paidAddress where the child lives	
Did : Assi: Reci A pr	EMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) any person in your household and listed in Section B of this worksheet receive Supplementation and Program Benefits in 2017 or 2018? Yes No If yes, then please indicate name(s) Dients of Supplemental Nutrition Assistance Program (SNAP) benefits must provide documentation the web site of your SNAP benefit eligibility or a letter confirming SNAP abbuilted.	cumentation.
By signing thi	This Worksheet s worksheet, I (we) certify that all the information reported on this worksheet is complete to upurposely give false or misleading information on this worksheet, you may be fined, be	

Parent's Signature Date

Southern University at New Orleans
Administration Building, Room 164
Office of Student Financial Aid

Student's Signature

Return by mail, email or fax to:

Date