INDEPENDENT

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.	Student ID Number	
Address (include a	pt. #)	City	State	Zip Code	
Date of Birth	E-Mai	l Address	Phone Number (Include A	Area Code)	

B. Family Information

List the people in your household, include:

- You and your spouse.
- Your children if you will provide more than half of their support from July 1, 2018 through June 30, 2019 even if they don't 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 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. **Income Tax Information** 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.

SPOUSE 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.

SPOUSE - - COMPLETE ONLY IF YOU DID NOT USE THE IRS DATA RETRIEVAL TOOL

____My parent was unable/chose not to use the IRS Data Retrieval Tool in FAFSA on the Web. My parent(s) 2016 IRS tax return transcript is attached to this worksheet.

I attest that			LE AND ARE NOT REQUIRED TO FILE not required to file an IRS 1040 for 2016. I have at	tached all of
I attest that	MPLETE ONLY IF YOU to the transfer of the tran	WILL NOT FILE) for 2017 and I ar	E AND ARE NOT REQUIRED TO FILE m not required to file an IRS 1040 for 2016. I have a	attached all of
D. <u>Addi</u>	ional Income			
			come received in 2016. Be sure to enter zero ay the processing of your verification.	s if no funds
			or no untaxed income will be required to sub	mit a ZERC
INCOME VE	RIFICATION FORM show	ing now living	expenses were met.	
Student			ar Year 2016	Spouse
			ntaxed Income	
\$			gs plans (paid directly or withheld from earnings) ed on W-2 Form Box 12a – 12d, codes D. E., F, G,	\$
\$	Untaxed portion of pension			\$
\$	Untaxed portion of IRA Dis			\$
\$	Tax exempt interest income		40A line 8b	\$
\$	Education credits from 104		paration or as a result of a legal requirement.	\$
	List the names of the childr The person's name to whor	ren receiving the comments of the support is part the support is part to the support is par	aid	
Did any p Assistance If yes, the Recipients of printout from submitted. F. Sign By signing this Warning: If ye	erson in your household and Program Benefits in 2017 in please indicate name(s)	d listed in Section of 2018? Assistance Proposition of the Information of the Informatio	on B of this worksheet receive Supplemental New No Series No Series No Series Supplemental New No Series Supplemental New No Series No Series Supplemental New No.	entation. A
to jail, or both. Student's Sign	ature	Date	Spouse's Signature (if applicable)	Date

Return by mail, e-mail or fax to:

Southern University at New Orleans Office of Student Financial Aid 6400 Press Drive, New Orleans, LA 70126

PHONE: (504) 286-5263 FAX: (504) 286-5213 E-Mail: <u>financialaid@suno.edu</u>