2016-17 Verification Worksheet – Dependent

D-V1 __V5

KSC Financial Aid Office/ Federal Student Aid Programs

You have been selected for a process called verification. Verification requires that you complete, sign, and return both sides of this worksheet and provide 2015 IRS tax transcripts for both the student applicant and his/her custodial parent(s) to the Financial Aid Office (FAO) within 30 days of your receipt of this request. You will be notified in writing if additional information is required. Please print.

SECTION A:		
Student's Name (Last, First, MI)	Student ID #	

Please Note: The FAO is required to verify that the tax information on your FAFSA is accurate. For this process to be completed, you must either (1) use the IRS Data Retrieval Tool (DRT) online at www.FAFSA.ed.gov without manually adjusting any tax data elements after the retrieval process or (2) provide copies of your 2015 Federal Tax Return Transcripts which you must request directly from www.IRS.gov. Please complete a Non-Tax-Filer Statement if you did not and were not required to complete a 2015 U.S. Income Tax Return. These forms and more information about the DRT are available online at: www.keene.edu/admissions/aid > Resources

SECTION B:

Please list the people whom your parents will support between July 1, 2016 and June 30, 2017. **Include:**

- Yourself, even if you don't live with your parents
- Your custodial parent(s)
- Your custodial parents' other children if your parents will provide more than half of their support from July 1, 2016, through June 30, 2017 OR if the other children would be required to provide parental information if they were competing a FAFSA for 2016-17. Include children who meet either of these standards even if the children do not live with the parents.
- Other people if they now live with your parents, your parents provide more than half of their support *and* your parents will continue to provide more than half of their support between July 1, 2016 and June 30, 2017.

PLEASE LIST ALL FAMILY MEMBERS IN THE HOUSEHOLD for 2016-2017							
Full Name	Age	Relationship to Student	College/University Attending for 2016/17	At least Half-time Y/N	Graduate or Undergrad Program?		
		Self	Keene State College				

NOTE: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Student ID#:	2016-17 Verification – D, p. 2	
pply, enter "N/A" fo Incomplete forms w	or Not Applicable where a response is requested or e <u>vill not be accepted.</u>	
Untaxed Income ar	d Benefits – Amounts Received in 2015	
nd retirement savir	cavings – List any payments (direct or withheld from gs plans (e.g. 401(k) or 403(b) plans), including, but Boxes 12a through 12d with codes D, E, F, G, H,	
ment	Total Amount Paid in 2015	
	, SIMPLE, Keogh and other qualified plans: Fro	
RS form 1040 – Lir	e 8b or 1040A – Line 8b.	
wledge and you ag	t, you certify that all of the information provided is ree, if asked, to provide information that will verify ourposely give false or misleading information, you	
Date		
	Untaxed Income and retirement savin your W-2 forms in Imment Unity Tax Credit and Income SEP Unity Tax Credit and Income Incom	