



## 2016-2017 Verification Worksheet-V6 Independent Student

Elizabethtown College  
Financial Aid Office  
One Alpha Drive  
Elizabethtown, PA 17022  
717-361-1404  
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Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Your 2016–2017 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 reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a spouse (if applicable) whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

### A) Tax and Income Information

**STUDENT and SPOUSE** (You MUST check one box below and provide copies of all W-2 form(s))

#### Did you file a 2015 Federal Income Tax Return?

- YES.** I used the IRS Data Retrieval Tool to transfer my 2015 income information to the FAFSA.
- YES.** I have enclosed a copy of my 2015 IRS Tax Return Transcript. (See instructions below this box)
- NO.** I did not file a 2015 Federal Income Tax Return. I have listed the sources and amounts of any earned income received in 2015. List every employer even if the employer did not issue an IRS W-2 form.

Employer: \_\_\_\_\_ Amt: \$ \_\_\_\_\_

Employer: \_\_\_\_\_ Amt: \$ \_\_\_\_\_

- NO.** I did NOT earn any income from wages in 2015.

#### IRS Data Retrieval Tool:

The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of the FAFSA on the web at [www.FAFSA.gov](http://www.FAFSA.gov). If you wish to utilize the IRS DRT, log into your most recent FAFSA transaction, and navigate to the “Student Financial” section.

#### How to obtain a Tax Return Transcript:

To obtain a 2015 IRS Tax Return Transcript, go to [www.irs.gov/transcript](http://www.irs.gov/transcript). Make sure to request the “IRS Tax Return Transcript” and **not** the “IRS Tax Account Transcript”. Use the Social Security Number (or the IRS individual taxpayer number) and the date of birth of the first person listed on the 2015 IRS Income Tax Return, and the address on file with the IRS (normally this will be the address used on the 2015 IRS Income Tax Return). **If the student and spouse filed separate 2015 IRS Income Tax Returns, 2015 IRS Tax Return Transcripts must be provided for both.**

## B) Verification of Other Untaxed Income for 2015

Complete sections 1-6 below. **If any item does not apply, enter “N/A” for Not Applicable where a response is requested, or enter 0 in an area where an amount is requested.** Answer each question below as it applies to the student (and the student’s spouse, if married) whose information is on the FAFSA.

To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2015, multiply that amount by the number of months in 2015 you paid or received it. If you did not pay or receive the same amount each month in 2015, add together the amounts you paid or received each month.

\* If more space is needed, provide a separate page with the student’s name and ID number at the top.

### 1) Payments to tax-deferred pension 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, and 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 | AGE of Child | Amount of Child Support Received in 2015 |
|--|---|--------------|--|
|  |   |              |  |
|  |   |              |  |
|  |   |              |  |
|  |   |              |  |

### 3) Housing, food, and other living allowances paid to members of the 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 educational benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, and 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 Form 1040 Line 25, Railroad Retirement Benefits, etc. DO NOT INCLUDE any items reported or excluded in 1-4 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. For example, if someone is paying rent, utility bills, etc., for the student or gives cash, gift cards, etc., include the amount of that person's contributions unless the person is the student's parent whose information is reported on the student's 2016–2017 FAFSA. Amounts paid on the student's behalf also include any distributions to the student from a 529 plan owned by someone other than the student or the student's parents, such as grandparents, aunts, and uncles of the student.

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

## C) Food Stamps (You MUST check one)

### Did you or a member of your household receive SNAP (Food Stamps) in 2014 or 2015?

**YES.** The student certifies that \_\_\_\_\_, a member of the student's household, received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as Food Stamp Program) sometime during 2014 or 2015.  
**\*If more than one person receives SNAP attach a separate page with the names of those getting the benefits**

**NO.** The student or any member of their household did not receive SNAP (Food Stamps) in 2014 or 2015.

## D) Family Information

Complete the grid below for all of your family members who live in your household and are listed on your FAFSA. **Always include yourself and your spouse, if you are married.** Include student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2016 through June 30, 2017, even if the children do not live with the student. Also include other people if they now live with the student and the student or spouse provides more than half of the other people's support and will continue to provide more than half of their support through June 30, 2017. List the schools and colleges which any household member will attend at least half time, in a degree, diploma, or certificate program at a postsecondary educational institution anytime between July 1, 2016 and June 30, 2017.

| Full Name | Age | Relationship | School/College in 2016-2017<br>(Must be Enrolled at Least Half Time) |
|-----------|-----|--------------|--|
|           |     | SELF         | ELIZABETHTOWN COLLEGE  |
|           |     |              |  |
|           |     |              |  |
|           |     |              |  |
|           |     |              |  |

\*If more space is needed, attach a separate page with the student's name and ID at the top

## E) Child Support Paid

Complete this section only if you or your spouse paid child support during 2015 to another household.

| Name of Person who Paid Child Support | Name of Person to Whom Child Support was Paid | Name of Child for Whom Support Was Paid | AGE of Child | Amount of Child Support Paid in 2015 |
|---------------------------------------|---|---|--------------|--------------------------------------|
|                                       |   |   |              |                                      |
|                                       |   |   |              |                                      |
|                                       |   |   |              |                                      |

\*If more space is needed, attach a separate page with the student's name and ID at the top

## F) Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct. **Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return completed forms to the Financial Aid Office.**