

## 2016 -17 Aggregate Verification Worksheet Virginia Union University

Your financial aid application was selected by the U. S. Department of Education for review in a process called verification. In this process, we are required by federal law (34 CFR, Part 668 to compare the information submitted on your FAFSA with the information provided on this form and with the 2015 IRS Tax Return Transcript information (if applicable). If there are differences between the documents that have been submitted, corrections may be needed. This is a 4-page document – please complete all pages. We cannot process any federal financial aid for you until verification has been completed. Please provide the required documents along with this completed form within 15 days of your receipt of this request.

A. Student's Information	
Student's Last Name First Name M.I.	Student's SSN
Student's Street Address (include apt. number)	Student's Date of Birth
City State Zip Code	Student's Email
Student's Daytime Phone Number (include area code)	_

## **B. Family Information**

Please list all of the members of your household below. This must include both of the dependent student's biological, adoptive or step-parent if the parents live together regardless of the marital status or gender. Please include the names of the college and enrollment status of each member in the household that will be enrolled at least half-time in a degree, diploma, or certificate program at an eligible postsecondary institution from July 1, 2015 to June 30, 2016.

✓ **INDEPENDENT STUDENTS: Yourself and your spouse/significant other** (if applicable); your children, if you will be providing more than half of their support from July 1, 2016 to June 30, 2017; and any other individuals that currently live with you that you are providing more than half of their support and will continue to do so from July 1, 2016 to June 30, 2017.

Full Name	Age	Relationship	College	Enrollment at least half-time
Student's name (example)		Self	Virginia Union University	yes

Please attach a separate page to list additional family members

udent's Name:					Student ID:	
Inco	me Information and	Tax Forms				
the Fe Ta Tra acc the at tra	tax filers' income must be as web process that can be a deral Tax Transcript. This can ax Return Transcript or by go anscript link. Please make a count transcript because the document(s) to the Financian the top of the tax return the anscript must also be included anscript has been submit	found at www.fain be obtained by coing online to: we have that you are account transcrial Aid Office, make transcript for profiled. <b>Verification</b>	fsa.gov. If y calling the laww.IRS.gover requesting the requesting the sure that per filing.	you did IRS at 1 very and so gethe taccepta the student the student If the solution to be contact.	not use this, you r (800)908-9946 and electing "Order a ax return transcrip ble documentation dent's name and ID tudent worked and	nay submit a 201 requesting a 201 Return or Accour of and not the tare. When submitting number is writted filed taxes, the
fol Yo	on tax filers' must submit the lowing the IRS contact infor u also must list below <b>ALL</b> py must be included with the	mation above (in sources of incom	n number 1 ne received	.) and r	equesting "Verifica	tion of Non-filing
Source of Income/Employer's Name		Student Amount		Spouse Amount	IRS W-2 Attached?	
Suzy's	Auto Body Shop (example)		Aillou	1111	Amount	Yes (example)
mplete the olist amo	d Support Paid  nis section if one of the student ount of child support paid by the of Person Who Paid Child Support	Name of Person Child Support	to Whom was Paid	Name	of Child for Whom pport Was Paid	Amount of Chile Support Paid in 2015
	Marty Jones (example)	Chris Sm	ris Smith		Terry Jones	\$3,000.00
ddition	al space is needed please add	d an additional sh	eet.			
Supp	olemental Nutrition	Assistance	Prograi	m (SI	NAP)	
Che	ck here if anyone listed in se	ction B received h	enefits fro	n SNAF	(formerly known a	s food stamps) in
	or 2016.			5 (1	(.S.meny known a	5 . 5 6 6 5 tallips) III

benefits.

Student's Name:	Student ID:
F. High School Completion Status In order for us to verify your high school completion status, we the Financial Aid office. We will first attempt to retrieve the Admissions/Enrollment Management. If we cannot obtain the integrated to provide the information to the Financial Aid Office.	he necessary document(s) from the Office of
A copy of the student's high school diploma.	
<ul> <li>A copy of the student's final official high school transc awarded.</li> </ul>	ript that shows the date when the diploma was
<ul> <li>A copy of the student's General Educational Developme</li> </ul>	nt (GED) certificate or GED transcript.
<ul> <li>An academic transcript that indicates the student succeptable for full credit toward a bachelor's deg</li> </ul>	, , ,
<ul> <li>If State law requires a homeschooled student to obtain homeschool (other than a high school diploma or its recommendation)</li> </ul>	·
<ul> <li>If State law does not require a homeschooled stud credential for homeschool (other than a high school di or the equivalent, signed by the student's parent or gua student completed and documents the successful con homeschool setting.</li> </ul>	oloma or its recognized equivalent), a transcript rdian, that lists the secondary school courses the
<b>G. Statement of Identity and Educational Pu</b> As required by the Department of Education, a student medicational Purpose. Complete either option #1 at Virginia Unitwith a Notary.	nust complete the Identity and Statement of
<b>Option #1 –</b> The student must appear in person at <b>Virginia U</b> presenting a valid government-issued photo identification (ID) other state issued ID, or passport. The institution will maintain a with the date it was received and the name of the official at the In addition, the student must sign, in the presence of the institution.	, such as, but not limited to, a driver's license, copy of the student's photo ID that is annotated institution authorized to collect the student's ID.
Statement of Education	al Purpose
certify that I	am the individual signing this Statement of
Print Student's Name Educational Purpose and that the federal student financial a educational purposes and to pay the cost of attending <b>Virginia</b>	

**Option #2** – If the above named student is unable to appear at Virginia Union University to verify his or her identity, the above statement must be signed in the presence of a Notary. The student must verify his/her identity by providing a copy of a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport.

Student's ID Number

	Notary's Certificate of Acknowledgement	
	State of	
	City/County of	
On	, before me, Notary's Name	
Date	Notary's Name	
personally ap	peared, Printed name of signer, the student	, and
pro	ovided to me on basis of satisfactory evidence of identification	
	Type of government-issued photo ID provided	
to be	the above-named person who signed the foregoing instrumen	nt.
	WITNESS my hand and official seal (seal)	
	Notary signature	
	My commission expires on	
	Date	
H. Certification an	d Signatures	
person signing this worksh	nt or spouse (if the student is independent) must sign and dat eet certifies that the information reported on this document is osely give false or misleading information you may be	complete and correct.
Student's Signature		Date

Student's Name: \_\_\_\_\_

information provided on this worksheet.

Student ID: \_\_\_\_\_

Submit this worksheet and supporting documents to:

Virginia Union University Graduate Financial Aid Office, 207 Kingsley Hall 1500 North Lombardy Street Richmond, Virginia 23220 Office phone: (804) 354-5924; Fax: (804) 354-5944

Email: gradaid@vuu.edu