

V6

2016-17 Household Resources 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, 2015.

✓ **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
<i>Student's name (example)</i>		<i>Self</i>	<i>Virginia Union University</i>	<i>yes</i>

Please attach a separate page to list additional family members

Student's Name: _____ Student ID: _____

C. Income Information and Tax Forms

1. All tax filers' income must be verified by using the IRS Data Retrieval Tool that is part of the FAFSA on the Web process that can be found at www.fafsa.gov. If you did not use this, you may submit a 2015 Federal Tax Transcript. This can be obtained by calling the IRS at 1 (800)908-9946 and requesting a 2015 Tax Return Transcript or by going online to: www.IRS.gov and selecting "Order a Return or Account Transcript link. Please make sure that you are requesting the tax return transcript and not the tax account transcript because the account transcript is not acceptable documentation. When submitting the document(s) to the Financial Aid Office, make sure that the student's name and ID number is written at the top of the tax return transcript for proper filing. If the student worked and filed taxes, their transcript must also be included. **Verification cannot be completed until the IRS tax return transcript has been submitted to the financial aid office.**
2. Non tax filers' must submit the IRS "Verification of Non-filing". This document may be obtained by following the IRS contact information above (in number 1) and requesting "Verification of Non-filing". You also must list below **ALL** sources of income received in 2015. If you received an IRS W-2 form, a copy must be included with the submitted documentation.

Source of Income/Employer's Name	Student Amount	Spouse Amount	IRS W-2 Attached?
<i>Suzy's Auto Body Shop (example)</i>			<i>Yes (example)</i>

D. Child Support Paid

Complete this section if one of the student's parents **paid** child support in 2015. If the student is Independent, you must also list amount of child support **paid** by the student.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Amount of Child Support Paid in 2015
<i>Marty Jones (example)</i>	<i>Chris Smith</i>	<i>Terry Jones</i>	<i>\$3,000.00</i>

If additional space is needed please add an additional sheet.

E. Supplemental Nutrition Assistance Program (SNAP)

_____ Check here if anyone listed in section B received benefits from SNAP (formerly known as food stamps) in 2015 and/or 2016.

Amount: \$ _____ If asked by Virginia Union University, I will provide documentation of receipt of these benefits.

Student's Name: _____ Student ID: _____

F. Verification of Other Untaxed income for 2015

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 in Paid

2. 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

3. 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 veterans' educational benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, Post-9/11 GI Bill

Name of Recipient	Type of Veterans Non-education Benefit	Amount of Benefit Received in 2015

4. 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 A – D 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

Student's Name: _____ Student ID: _____

5. 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 2015–2015 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 2015–2016 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.

Name of Recipient Purpose: e.g., Cash, Rent, Books	Amount Received in 2015	Source

If additional space is needed for **any** section of this document, please add an additional sheet.

G. Certification and Signatures

The student and one parent or spouse (if the student is independent) must sign and date this worksheet. Each person signing this worksheet certifies that the information reported on this document is complete and correct. **WARNING: If you purposely give false or misleading information you may be fined, sentenced to jail or both.**

Student's Signature

Date

Spouse's Signature if Independent

Date

The Financial Aid Office has the right to request any additional documentation needed to support any of the information provided on this worksheet.

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: Grdaid@vuu.edu