



DIVISION OF STUDENT AFFAIRS
OFFICE OF FINANCIAL AID

TELEPHONE: (850) 599-3730
FAX: (850) 561-2730
EMAIL: financialaiddocs@fam.u.edu

2019–2020 Verification Worksheet Independent Student

Your 2019–2020 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 the Office of Financial Aid will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. The school will send corrections electronically to have your information reprocessed. You must complete and sign this worksheet, attach any required documents, and submit to the Office of Financial Aid at Florida A & M University. You may be asked for additional information. Please submit the worksheet and required documents soon as possible so that your financial aid will not be delayed.

A. Independent Student's Information

| | | | |
|---|------------|----------|--|
| Last Name | First Name | M.I. | ID Number |
| Street Address (include apt. no.) | | | Date of Birth |
| City | State | Zip Code | Email Address |
| (____) _____ Home Phone Number (include area code) | | | (____) _____ Alternate or Cell Phone Number |

B. Independent Student's Family Information

List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2019 through June 30, 2020, or if the child would be required to provide your information if they were completing a FAFSA for 2019–2020. Include children who meet either of these standards, even if they do not 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 through June 30, 2020.
- Write in the name of the college for any noted above, **excluding parent(s)**, who will be attending college at least halftime between July 1, 2019 and June 30, 2020, and will be enrolled in a degree, diploma, or certificate program.

| Full Name | Age | Relationship | College | Will be Enrolled at Least Half Time |
|-----------|-----|--------------|-----------------------------------|-------------------------------------|
| | | <i>Self</i> | <i>Florida A&M University</i> | <i>Yes</i> |
| | | | | |
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| | | | | |

C. Independent Student’s Income Information to Be Verified

1. TAX RETURN FILERS – Complete this section if the student or spouse, **filed** a 2017 income tax return with the Internal Revenue Service (IRS).

Check each box that applies:

- I, (and, if married, my spouse’s) have **used** the IRS Data Retrieval Tool to transfer IRS income information into the FAFSA
- I, *am* unable **or will not** use the IRS Data Retrieval Tool. Attach a copy of the student 2017 **IRS tax return transcript**—not photocopies of the income tax return.

To obtain an IRS tax return transcript go to www.irs.gov and click on the “Order a Return Transcript” or call 1-800-908-9946. Make sure you request the “IRS tax return transcript” and not the “IRS tax account transcript.”

Amended Tax – If the student or your spouse filed an amended 2017 IRS tax return, the student/spouse **must submit** the following documents:

- ✓ A signed copy of the 2017 IRS Form 1040X “Amended U.S. Individual Tax Return
- ✓ 2017 IRS Tax Transcript

Victims of Identity Theft. An individual who was the victim of IRS tax-related identity theft **must provide:**

- ✓ A Tax Return DataBase View (TRDBV) transcript obtained from the IRS, or any other IRS tax transcript(s) that includes all of the income and tax information required to be verified; **and**
- ✓ A statement signed and dated by the tax filer indicating that he or she was a victim of IRS tax-related identity theft and that the IRS is aware of the tax-related identity theft.

TAX RETURN NONFILERS—Complete this section if you, the student (and, if married, your spouse), will not file and are not required to file a **2017** income tax return with the IRS.

Check the box that applies:

- The student (and, if married, the student’s spouse) was not employed and had no income earned from work in **2017**.
- The student (and, if married, the student’s spouse) was employed in **2017** and has listed below the names of all the student’s employers, the amount earned from each employer and IRS W-2 form is attached. *List every employer even if they did not issue an IRS W-2 form.*

| Employer’s Name | 2017 Amount Earned | IRS W-2 Attached? |
|--|-----------------------------|----------------------|
| <i>Suzy’s Auto Body Shop (example)</i> | <i>\$2,000.00 (example)</i> | <i>Yes (example)</i> |
| | | |
| | | |
| | | |
| | | |

D. Independent Student’s Other Information to Be Verified

1. Complete this section if you or your spouse, if married, **paid child support in 2017**.

Either I, or if married my spouse who is listed in Section B of this worksheet, paid child support **in 2017**. If asked by my school, I will provide documentation of the payment of child support. *If you need more space, attach a separate page that includes your name and Social Security Number at the top.*

| 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 2017 |
|---------------------------------------|---|---|---|
| <i>Marty Jones(example)</i> | <i>Chris Smith(example)</i> | <i>Terry Jones(example)</i> | <i>\$6,000.00(example)</i> |
| | | | |
| | | | |
| | | | |

E. Untaxed Income

Do not include financial aid, social security benefits, or welfare benefits. Be sure to enter N/A for items that do not apply

| | Student | Spouse |
|---|---------|--------|
| Payments to tax-deferred pension, amounts reported on the W-2 forms in Boxes 12a -12d, codes D, E, F, G, H and S | | |
| Child Support Received | | |
| Housing, Food, Other living allowances for military/clergy | | |
| Veteran’s Non-Educational benefits(disability, death pension, Dependency& Indemnity Comp and/or VA Work-Study allowance | | |
| Other Untaxed Income Not Reported(Worker’s Comp, Disability, etc) | | |

F. Certification and Signature

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married, the spouse’s signature is optional.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student’s Signature

Date

Spouse’s Signature

Date

Please submit the Verification Worksheet and supporting documents to:
Office of Financial Aid
101 Foote- Hilyer Administration Center
Tallahassee, FL 32307

Please keep a copy for your records.