



2016-2017 FAFSA Verification Worksheet

Your Free Application for Federal Student Aid (FAFSA) was selected for review by the U.S. Department of Education in a process called "Verification". This means Dillard must compare the information from your FAFSA, your 2015 Federal tax transcript, this worksheet, and other financial documents. If there are differences between your FAFSA information and your financial documents, additional information may be requested and/or corrections will be processed. The law says that we have the right to ask you for this information and resolve any conflicts before awarding Federal financial aid (34 CFR, Part 668). **You must provide Dillard University with all the requested applicable documents.**

You may contact the IRS at 1-800-829-1040 or <http://www.irs.gov/> if you need copies of your tax transcript.

Information should be forwarded to Dillard at the address below or via fax. You should provide all required information as soon as possible. Attach an additional sheet if necessary. **Your Federal financial aid awards will not be offered until the verification review is completed and validated.**

Dillard University
Office of Financial Aid & Scholarships
Rosenwald Hall 126
2601 Gentilly Blvd. New
Orleans, LA 70122
Fax: (504) 816-5456

Selected For	Verification Tracking Flag	Verification Tracking Group	Fill Out Section(s)
<input type="checkbox"/>	V1	Standard Verification	A, C, D, E, F, G
<input type="checkbox"/>	V4*	Custom Verification	A, B, F, G
<input type="checkbox"/>	V5*	Aggregate Verification	A, B, C, D, E, F, G
<input type="checkbox"/>	V6	Household Resources Verification	A, C, D, E, F, G

A. Student Information

Last Name	First Name	M.I.	Student ID
Address (include apt. no.)		Date of birth	
City	State	ZIP code	Phone number (include area code)

B. Student High School Information

Name of **HIGH SCHOOL** Graduated or GED_ _____ Submitted to Admissions
 Yes No

C. Household Information

INDEPENDENT STUDENT – List yourself, spouse (if married), and your children. List other people if they now live with you **and** you will provide more than half of their support from July 1, 2016- June 30, 2017 (legal documentation of support will be required).
DEPENDENT STUDENT – List yourself and your parent(s) (including step-parent), even if you don't live with your parents. Include your parent's other children, even if they don't live with your parent(s), **if** (a) your parents will provide more than half their support from July 1, 2016 - June 30, 2017, or (b) the children would be required to provide parental information on their FAFSA.

Full Name	Age	Relationship to Student	College Attending in 2016--2017
		Self	Dillard University

D. Student/Spouse Tax Form and Income/Benefit Information

- Check one: Required to file a 2015 U.S. Income Tax Return. Attach a copy of a Federal Tax Return Transcript from the IRS (Not a copy of Federal Tax Return filed), and all copies of your 2015 W-2 forms.
 Used IRS Data Retrieval Tool to complete 2016-17 FAFSA. Please submit all copies of your 2015 W-2 forms.
 Will not file and not required to file a 2015 U.S. Income Tax Return. Complete the table below, listing all sources of income and/or financial support you received in 2015. **Attach all 2015 W-2s and Supplemental Resource Form**

Employer or Source of Financial Support	Total Earned/Received in 2014
	\$
	\$
	\$

E. Parent Tax Form and Income Benefit/ Information (If student is Dependent)

- Check one: Required to file a 2015 U.S. Income Tax Return. Attach a copy of a Federal Tax Return Transcript from IRS (Not a copy of Federal Return filed) and all copies of your 2015 W-2 forms.
 Used IRS Data Retrieval Tool to complete 2016-17 FAFSA. Please attach all copies of your 2015 W-2 forms.
 Will not file and not required to file a 2015 U.S. Income Tax Return. Complete the table below, listing all sources of income and/or financial support your parent(s) received in 2015. **Attach all W-2s and Supplemental Resource Form.**

Employer or Source of Financial Support	Total Earned/Received in 2015
	\$
	\$
	\$

F Additional Financial Information From 2015

Calendar Year 2015 (January 1, 2015 – December 31, 2015)	Student & Spouse	Parent(s)
Untaxed Income: Please list any untaxed income received in year 2015. SOURCE:	\$	\$
Did you receive <u>Supplemental Nutrition Assistance Program (SNAP)/Food Stamp Benefits</u> ? Attach official documentation of how much you received during 2015.	\$	\$
Child support <u>RECEIVED</u> : Please report the yearly amount of child support received in year 2015.	\$	\$
Child support <u>PAID</u> : Report amount of child support PAID in year 2015 due to divorce or separation or as a result of a legal requirement. Don't include support received for children in your (or your parents') household.	\$	\$
1.	\$	\$
2.	\$	\$
3.	\$	\$
4.	\$	\$

G. Read Statement Carefully and Sign

By signing this worksheet, I certify that all information reported is complete and correct. I understand that purposely providing false or misleading information on this worksheet may result in a fine, jail sentence, or both.

Student Signature Date

Parent Signature (if dependent) Date

Important: Please make sure your name and student ID number are on all documents