

Memphis College of Art

2016-2017 Verification Worksheet Dependent Student - 6

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 must 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.

A. Dependent Student's Information

Student's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Student's Email Address:
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number:

B. Dependent Student's Family Information

List below the people in your parent(s)' household from June 30, 2016 through July 1, 2017. Include:

- Yourself and your parent(s) (including a stepparent) even if you don't live with your parent(s).
- Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the other children would be required to provide parental information if they were completing a FAFSA for 2016-2017. Include children who meet either of these standards, even if they do not live with your parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.
- Include the name of the college for any household member, excluding your parent(s), who will be enrolled, at least half time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2016, and June 30, 2017.

If more space is needed, attach a separate page with the student's name and Social Security Number at the top.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
Mary Jones (ex.)	18	Sister	Central University	Yes
		Self		

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary education institutions is inaccurate.

Name: _____ Social Security Number: _____

C. Dependent Student's Income Information to Be Verified

1. TAX RETURN FILERS—**Instructions:** Complete this section if the student filed or will file a 2015 IRS income tax return(s). *The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web at FAFSA.gov.* In most cases, no further documentation is needed to verify 2015 IRS income tax return information that was transferred into the student's FAFSA using the IRS DRT if that information was not changed.

Check the box that applies:

- The student has used the IRS DRT in FAFSA on the Web to transfer 2015 IRS income tax return information into the student's FAFSA.
- The student has not yet used the IRS DRT in FAFSA on the Web, but will use the tool to transfer 2015 IRS income tax return information into the student's FAFSA once the 2015 IRS income tax return has been filed.
- The student is unable or chooses not to use the IRS DRT in FAFSA on the Web, and instead will provide the school a **2015 IRS Tax Return Transcript(s)** (signature not required).

Check the box that applies:

- The student was not employed and had no income earned from work in 2015.
- The student was employed in 2015 and has listed below the names of all the student's employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is attached. Attach copies of all 2015 IRS W-2 forms issued to the student by employers. *List every employer even if they did not issue an IRS W-2 form.*

Employer's Name	2015 Amount Earned	IRS W-2 Attached?
Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Yes (example)

D. Verification of 2015 IRS Income Tax Return Information for Parent Tax Filers

1. TAX RETURN FILERS—**Instructions:** Complete this section if the parents filed or will file a 2015 IRS income tax return(s). *The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web at FAFSA.gov.* In most cases, no further documentation is needed to verify 2015 IRS income tax return information that was transferred into the student's FAFSA using the IRS DRT if that information was not changed.

Check the box that applies:

- The parents have used the IRS DRT in FAFSA on the Web to transfer 2015 IRS income tax return information into the student's FAFSA
- The parents have not yet used the IRS DRT in FAFSA on the Web, but will use the tool to transfer 2015 IRS income tax return information into the student's FAFSA once the 2015 IRS income tax return has been filed.
- The parents are unable or choose not to use the IRS DRT in FAFSA on the Web, and instead will provide the school a **2015 IRS Tax Return Transcript(s)**. (signature not required)

Name: _____ Social Security Number: _____

2. TAX RETURN NONFILERS— The instructions and certifications below apply to each parent included in the household. Complete this section if the parents will not file and are not required to file a 2015 income tax return with the IRS.

Check the box that applies:

- Neither parent was employed nor had income earned from work in 2015.
- One or both parents were employed in 2015 and have listed below the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is provided. Provide copies of all 2015 IRS W-2 forms issued to the parents by employers. List every employer even if they did not issue an IRS W-2 form.

Employer's Name	2015 Amount Earned	IRS W-2 Attached?
Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Yes (example)

E. Child Support Paid

Enter the information for one or both of your parents included in the household and/or you, if you paid child support in 2015. List below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names and ages of the children for whom the child support was paid, and the total annual amount of child support paid in 2015 for each child.

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

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name and Age of Child for Whom Support Was Paid	Name and Age of Child for Whom Support Was Paid
John Smith (example)	Diane Smith (example)	George Smith - Age 7 (example)	\$6,000 (example)
Total Amount of Child Support Paid in 2015			\$

Note: If we have reason to believe the information regarding child support paid is inaccurate, we may require additional documentation.

- Neither parent paid child support for any of their children in 2015.

F. Supplemental Nutrition Assistance Program (SNAP), formerly known as the Food Stamp Program, Benefits Received

- Neither parent nor any member of the parent's household received SNAP Benefits in 2014 or 2015.
- One or both parents or a member of the parents' household received benefits from SNAP sometime during 2014 or 2015.

Name: _____

Social Security Number: _____

G. High School Completion Status

Provide one of the following documents that will indicate your high school completion status when you begin college in 2016–2017:

- A copy of your high school diploma.
- A copy of your final official high school transcript that shows the date when the diploma was awarded.
- A state certificate or transcript you received after you passed a State-authorized examination (GED test, HiSET, TASC, or other State-authorized examination) that the State recognizes as the equivalent of a high school diploma.
- If you completed secondary education in a foreign country, a copy of the “secondary school leaving certificate” or other similar document.
- An academic transcript that indicates you successfully completed at least a two-year program that is acceptable for full credit toward a bachelor’s degree.
- If you were homeschooled in a state where state law requires you to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.
- If you were homeschooled in a state where state law does not require you to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a transcript or the equivalent, signed by your parent or guardian, that lists the secondary school courses you completed and includes a statement that you successfully completed a secondary school education in a homeschool setting.

H. Verification of Untaxed Income

As part of this process, MCA must verify all untaxed income received during the calendar year of 2015. **If any item does not apply, enter “N/A” for Not Applicable where a response is requested, or enter O in an area where an amount is requested.** Information left blank will delay the awarding and receipt of your financial aid.

The information provided below is applicable to:

- The student,
- The spouse of a student if the student is married
- The parents (including stepparents) even if the student doesn’t live with the parents.

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 included in the household. If this amount is different than the amount reported on the FAFSA, provide documentation of the actual amount received in 2015. **Do not include** foster care payments, adoption payments, or any other amount that was court-ordered but not actually paid.

Name: _____ Social Security Number: _____

Name of Adult Who Received Support in 2015	Name of Child for Whom Support was Received	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 veterans' non-educational benefits such as: Montgomery G.I. Bill, Dependents Education Assistance Program, VEAP Benefits, Post-9/11 G.I. Bill.

Name of Recipient	Type of Benefit Received	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 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

Name of Recipient	Type of Benefit Received	Amount of Benefit Received in 2015

Name: _____

Social Security Number: _____

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 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., to 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 distributions to the student from a 529 plan owned by someone other than the student or the student's parents.

Purpose: e.g. cash, rent, utilities, books, tuition	Source of Support	Amount of Support Received in 2015

7. Additional Information

We assume that every person must have some source of income and/or support to meet the basic living expenses. So that we can fully understand a student's family financial situation, please provide below information about any other resources, benefits, and other amounts received by the student and any members of the student's household. **This may include items that were not required to be reported on the FAFSA or other forms submitted to the Financial Aid Office, and include such things as federal veterans educational benefits, military housing, Social Security benefits, SNAP, TANF, WIC, financial aid refund, Federal Work-Study, etc.**

Name of Recipient	Type of Financial Support	Amount of Financial Support Received in 2015

Comments

If your 2015 income is considered to be extremely low, you must give **specific** details regarding how you supported yourself. You should explain how you provided for your living expenses (rent/mortgage, food, utilities, cell phone, cable, internet, transportation, car payment, car insurance, fuel, repairs) and miscellaneous expenses (personal expenses, child care, insurance). If you do not provide sufficient explanation, additional information/documentation will be requested to complete the verification process.

IMPORTANT:

If any item does not apply, enter "N/A" for Not Applicable where a response is requested or enter 0 in an area where the amount is requested. Information left blank will result in the delay of awarding and receipt of your financial aid.

Name: _____

Social Security Number: _____

I. Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Print Student's Name:

Student's ID Number:

Student's Signature:

Date:

Parent's Signature:

Date:

**Please submit this form to the Financial Aid Office of Memphis College of Art: 1930 Poplar Ave., Memphis, TN 38104
financialaid@mca.edu**