

Memphis College of Art

2016-2017 Verification Worksheet Independent 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 the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents.

A. Independent 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. Independent Student's Family Information

List below the people in your household from July 1, 2016 through June 30, 2017. 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, 2016, through June 30, 2017, or if the child would be required to provide your 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 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, 2017.
- Include the name of the college for any household member 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.)	28	Wife	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. Independent Student's Income Information to Be Verified

1. **TAX RETURN FILERS Instructions:** Complete this section if the student and spouse 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).

2. **TAX RETURN NONFILERS** instructions and certifications below apply to the student and spouse, if the student is married. Complete this section if the student and spouse will not file and are not required to file a 2015 income tax return with the IRS.

Check the box that applies:

- The student and/or spouse were not employed and had no income earned from work in 2015.
- The student and/or spouse 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?
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00 (example)</i>	<i>Yes (example)</i>

D. Child Support Paid

Enter the information for you and/or your spouse, if child support was paid 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
<i>John Smith (example)</i>	<i>Diane Smith (example)</i>	<i>George Smith - Age 7 (example)</i>	<i>\$6,000 (example)</i>
Total Amount of Child Support Paid in 2015			\$

Name: _____ Social Security Number: _____

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

Neither I nor my spouse paid child support for any children in 2015

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

Neither I nor any member of my household received SNAP Benefits in 2014 or 2015.

I or a member of my household received benefits from SNAP sometime during 2014 or 2015.

F. 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.

G. 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 0 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

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: _____ Social Security Number: _____

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 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 arrangements (e.g., cafeteria plans, foreign income exclusion, or credit for federal tax on special fuels).

Name: _____ Social Security Number: _____

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

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., fo 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.

Name: _____ Social Security Number: _____

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.

H. 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**