

**WHAT IS VERIFICATION?**

Your application was selected by the U.S. Department of Education for review in a process called "Verification". The Office of Financial Aid is required to verify certain items that were listed on your FAFSA. If there are differences between your application information and the documents you submit, your application may need to be corrected. **The Office of Financial Aid cannot make any federal financial aid payments available to you or process a student loan request until all verification requirements have been met and the necessary corrections have been made.**

**WHAT ARE THE STEPS?**

1. Complete the IRS Data Retrieval Tool (DRT) through FAFSA on the Web at [www.fafsa.gov](http://www.fafsa.gov). This will need to be done for a student tax filer, along with for each parent included in the household.
2. **If you cannot complete Step 1**, you may order a TAX RETURN TRANSCRIPT from the Internal Revenue Service online at [www.irs.gov](http://www.irs.gov). Most people will have the option to either print out a copy of their Tax Return Transcript after setting up a User ID or to have a copy of the Tax Return Transcript mailed out to them.
3. Complete and gather the required signatures for this worksheet and return it, along with any other required documents to the Office of Financial Aid.

**A. STUDENT AND FAMILY INFORMATION**

|   |                      |                |  |
|---|----------------------|----------------|--|
| Student's Last Name                             | Student's First Name | Student's M.I. | Student's Last 4 of SSN                  |
| 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 |

List below the people in your parents' household. Include:

- Yourself.
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parents' other children if the parents will provide more than half of the children's 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 the children do not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of the other people's support and will continue to provide more than half of their support through June 30, 2017.

Write the names of **all** family members including **yourself** that would qualify under the standards noted above. For the Number in College: Include below information about any household member, excluding the parents, who will be enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2016, and June 30, 2017, include the name of the college.

| Full Name                    | Age       | Relationship  | College                   |
|------------------------------|-----------|---------------|---------------------------|
| <i>Missy Jones (example)</i> | <i>18</i> | <i>Sister</i> | <i>Central University</i> |
|                              |           | Self          |                           |
|                              |           |               |                           |
|                              |           |               |                           |
|                              |           |               |                           |
|                              |           |               |                           |
|                              |           |               |                           |

**B. SNAP BENEFITS INFORMATION**

Did the student, parent(s), or any other members of your household that were included in the chart above receive benefits from the Supplemental Nutrition Assistance Program (SNAP), formerly known as Food Stamps, at any time during the 2014 or 2015 years?

☐ Yes

☐ No

**Continued on next page →**

### C. CHILD SUPPORT INFORMATION

Did you or your parent pay child support in 2015? ☐ Yes ☐ No If you checked "YES", please fill out the chart below:

| Name of the Person Who Paid Child Support | Name of the Person to Whom Child Support Was Paid | Name of the Child For Whom Support Was Paid | Amount of Child Support Paid in 2015 |
|---|---|---|--------------------------------------|
|   |   |   |                                      |
|   |   |   |                                      |
|   |   |   |                                      |

### D. STUDENT'S INCOME INFORMATION – Check the box that applies

- ☐ The student has used the IRS Data Retrieval Tool in *FAFSA on the Web* at [www.fafsa.gov](http://www.fafsa.gov) to transfer the 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. I understand this will cause my financial aid file to be incomplete until it is resolved.
- ☐ 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)**. I understand that a copy of the 2015 Federal Tax Transcript (NOT the Account Transcript) can be requested from [www.irs.gov](http://www.irs.gov).
- ☐ The 2015 Tax Return Transcript is attached.
- ☐ The 2015 IRS Tax Return Transcript will be provided later.
- ☐ I was not required to file a 2015 Federal Income Tax Return. [If you've checked this box, please list sources and amounts of any earned income received in 2015 and attach any corresponding W-2s.]
- ☐ Check this box if you were not employed and had no income earned from work in 2015.

| Complete this table only if you checked the third box above.<br>Employer's Name | 2015 Amount Earned         | Has an IRS W-2 been received?<br>(If so, please attach.) |
|---|----------------------------|--|
| <i>ABC Company (example)</i>  | <i>\$2,132.47(example)</i> | <i>Yes(example)</i>                                      |
|   |                            |  |
|   |                            |  |
|   |                            |  |

### E. PARENT'S INCOME INFORMATION – Check the box that applies

Check only ONE of the three boxes below and provide the requested information and documents for that item:

- ☐ The parents have used the IRS Data Retrieval Tool in *FAFSA on the Web* at [www.fafsa.gov](http://www.fafsa.gov) to transfer the 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. I understand this will cause the financial aid file to be incomplete until it is resolved.
- ☐ 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)**. I understand that a copy of the 2015 Federal Tax Transcript (NOT the Account Transcript) can be requested from [www.irs.gov](http://www.irs.gov).
- ☐ The 2015 Tax Return Transcript is attached.
- ☐ The 2015 IRS Tax Return Transcript will be provided later.
- ☐ I was not required to file a 2015 Federal Income Tax Return. [If you've checked this box, please list sources and amounts of any earned income received in 2015 and attach any corresponding W-2s.]
- ☐ Check this box if you, the parents, were not employed and had no income earned for 2015.

| Complete this table only if you checked the third box above.<br>Employer's Name | 2015 Amount Earned         | Has an IRS W-2 been received?<br>(If so, please attach.) |
|---|----------------------------|--|
| <i>ABC Company (example)</i>  | <i>\$2,132.47(example)</i> | <i>Yes(example)</i>                                      |
|   |                            |  |
|   |                            |  |
|   |                            |  |

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## F. VERIFICATION OF OTHER UNTAXED INCOME - 2015

### 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 |
|-------------------------------------|---------------------------|
|                                     |                           |
|                                     |                           |

### Child Support Received

List the actual amount of any child support received in 2015 for the children in your household.

**Do not include** foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.

| Name of Adult Who Received the Support | Name of Child For Whom Support Was Received | Amt of Child Support Rec'd in 2015 |
|--|---|------------------------------------|
|  |   |                                    |
|  |   |                                    |

### 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 | Amt. of Benefit Rec'd in 2015 |
|-------------------|--------------------------|-------------------------------|
|                   |                          |                               |
|                   |                          |                               |

### 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 |
|-------------------|--|------------------------------------|
|                   |  |                                    |
|                   |  |                                    |

### 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 | Types of Other Untaxed Income | Amt of Other Untaxed Income Received for 2015 |
|-------------------|-------------------------------|---|
|                   |                               |   |
|                   |                               |   |

### 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 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., 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 2016–2017 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.

| Purpose | Amount Received in 2015 | Source |
|---------|-------------------------|--------|
|         |                         |        |
|         |                         |        |

## G. CERTIFICATION

I certify that all the information reported to qualify for Federal student aid is complete and correct.

Student Signature & Date

Parent Signature & Date

**FINLANDIA**  
UNIVERSITY

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