



Adrian College

Household Resources Verification Worksheet (V6)

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 may ask you to confirm the information you and your parents reported on your FAFSA. If there are differences, your FAFSA information may need to be corrected. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

A. STUDENT INFORMATION

Student First Name	Student Last Name	Student Middle Name
Student ID#	Student Street Address (include apt. no.)	
Student Date of Birth	City	State
		Zip Code
Student Email Address	Student Home Phone Number	Student Cell Phone Number

B. STUDENT HOUSEHOLD INFORMATION

Read carefully and complete each column! Write the names of the household members who will meet the following criteria from July 1, 2016 to June 30, 2017.

- Yourself, even if you don't live with your parent(s)
- Your parent(s), including stepparent, in this household
- Your parents' other children in this household if your parents will provide more than half their support
- Other people: list only if they now live with the parents listed below and will continue to live with them through June 30, 2017 and your parents are providing more than half their support

Full Name	Age	Relationship	Will this household member attend college at least half-time? If yes, please list college below.
		Self	Adrian College
		<input type="checkbox"/> Parent <input type="checkbox"/> Step-parent	Parents and/or Step-parents – Do Not Complete
		<input type="checkbox"/> Parent <input type="checkbox"/> Step-parent	Parents and/or Step-parents – Do Not Complete
		<input type="checkbox"/> Sibling <input type="checkbox"/> Other	<input type="checkbox"/> No <input type="checkbox"/> Yes Name of College:
		<input type="checkbox"/> Sibling <input type="checkbox"/> Other	<input type="checkbox"/> No <input type="checkbox"/> Yes Name of College:
		<input type="checkbox"/> Sibling <input type="checkbox"/> Other	<input type="checkbox"/> No <input type="checkbox"/> Yes Name of College:
		<input type="checkbox"/> Sibling <input type="checkbox"/> Other	<input type="checkbox"/> No <input type="checkbox"/> Yes Name of College:
		<input type="checkbox"/> Sibling <input type="checkbox"/> Other	<input type="checkbox"/> No <input type="checkbox"/> Yes Name of College:

C. STUDENT INCOME INFORMATION

1) **TAX RETURN FILERS**—Important Note: If at any time an amended 2015 IRS tax return is filed, the student must contact the financial aid administrator before completing this section.

THE STUDENT HAS FILED TAXES AND has used the IRS Data Retrieval Tool in FAFSA on the Web to retrieve and transfer 2015 IRS income information into the student’s FAFSA, either on the initial FAFSA or when making a correction to the FAFSA.

THE STUDENT HAS FILED TAXES AND is unable or chooses not to use the IRS Data Retrieval Tool in FAFSA on the Web, and the student is submitting to the school a 2015 IRS tax return transcript—

Students & parents should first log back into the current year FAFSA and attempt to use the Data Retrieval Tool, if unsuccessful please:

- visit www.irs.gov and request a tax return transcript;
- or call 1-800-908-9946 to request a 2015 Tax Return Transcript;
- or download the IRS2GO app and have your 2015 Tax Return Transcript mailed to the address provided on your taxes.

2) **TAX RETURN NONFILERS**—complete this section if the student is **not required** to file a 2015 income tax return with the IRS.

The student was not employed and had no income earned from work in 2015.

THE STUDENT DID NOT FILE TAXES AND was employed in 2015. List 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. PARENT INCOME INFORMATION (Dependent Students Only) - Note: If two parents were reported in Section B of this worksheet, the instructions and certifications below refer and apply to both parents.

1) **TAX RETURN FILERS**—Important Note: If at any time an amended 2015 IRS tax return is filed, the parent/student must contact the financial aid administrator before completing this section.

THE PARENT HAS FILED TAXES AND has used the IRS Data Retrieval Tool in FAFSA on the Web to retrieve and transfer 2015 IRS income information into the student’s FAFSA, either on the initial FAFSA or when making a correction to the FAFSA. *The student’s school will use the IRS information that was transferred in the verification process.*

THE PARENT HAS FILED TAXES AND is unable or chooses not to use the IRS Data Retrieval Tool in FAFSA on the Web, and the student is submitting to the school a 2015 IRS tax return transcript—

Students & parents should first log back into the current year FAFSA and attempt to use the Data Retrieval Tool, if unsuccessful please:

- visit www.irs.gov and request a tax return transcript;
- or call 1-800-908-9946 to request a 2015 Tax Return Transcript;
- or download the IRS2GO app and have your 2015 Tax Return Transcript mailed to the address provided on your taxes.

2) **TAX RETURN NONFILERS**—complete this section if the parent is **not required** to file a 2015 income tax return with the IRS.

The parent(s) was not employed and had no income earned from work in 2015.

THE PARENT(S) DID NOT FILE TAXES AND was employed in 2015. List below the names of all the parent’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 parent 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>

Student Name: _____ Student ID: _____

E. SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM – SNAP (formerly known as Food Stamp Program)

Did anyone in the student’s household receive SNAP benefits during the calendar year(s) 2014-2015?

- SNAP may be known by another name in some states.
- For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243).

_____ Yes (submit a copy of the benefit statement) _____ No

F. CHILD SUPPORT PAID

Did anyone listed in the student’s household (Section B) pay child support in 2015?

_____ Yes (Complete the table below) _____ No

Note: Additional documentation may be required regarding SNAP benefits and/or Child Support Paid.

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 2015
<i>Marty Jones</i>	<i>Chris Smith (example)</i>	<i>Terry Jones</i>	<i>\$6,000.00</i>

G. Verification of Other Untaxed Income for 2015

If the student **was required** to provide parental information on the FAFSA answer each question below as it applies to the student and the student’s parent(s) whose information is on the FAFSA. If the student **was not required** to provide parental information on the FAFSA, answer each question below as it applies to the student (and the student’s spouse, if married) whose information is on the FAFSA.

To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2015, multiply that amount by the number of months in 2015 you paid or received it. If you did not pay or receive the same amount each month in 2015, add together the amounts you paid or received each month. If more space is needed, provide a separate page with the student’s name and ID number at the top.

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 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	Amount of Child Support Received in 2015

Student Name: _____ Student ID: _____

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 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

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 of Recipient	Type of Other Untaxed Income	Amount of Other Untaxed Income 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 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: e.g., Cash, Rent, Books	Amount Received in 2015	Source

Student Name: _____ Student ID: _____

7. Additional information:

So that we can fully understand the student's family's 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 education benefits, military housing, SNAP, TANF, etc.

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

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

Comments: _____

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 (dependent students) must physically sign and date (electronic signatures will not be accepted).**

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

Student Signature

Date

Parent or Spouse Signature

Date

Submit this worksheet to the Office of Financial Aid at Adrian College.

You should make a copy of this worksheet and all submitted documentation for your records.