

Office of Student Financial Assistance

VERIFICATION WORKSHEET

2019-2020 ACADEMIC YEAR

Student's Name

UCF ID _____

Spouse Name (if married)_____

- Date_____
- Read carefully and complete this verification packet in **black or blue ink**.
- <u>Please refer to your SAR (Student Aid Report) when answering the questions. Any discrepancy may need an explanation and additional</u> documentation.
- Please answer your questions as of the date you signed the FAFSA.
- If a question does not apply to you or your spouse, if married, mark the answer as zero or N/A (not applicable).
- Do not skip any questions. If you leave any section blank, this form may be deemed incomplete and result in the delay of processing aid.

Below is information & instructions for whom to include in the Household, as well as for the "Name of College" field.

A. If the Student Marital Status is:

- Single
- Divorced
- Separated As of the date the FAFSA was completed, you and your spouse were not living together for an indefinite period of time <u>and</u> the marriage is severed.
- Widowed

Include the following in the Household

- Yourself (the student)
- Your children IF
 - You will provide more than 50% of the children's support from July 1, 2019 through June 30, 2020 - OR
 - The children attending college would be required to provide parent information when completing the FAFSA
- Other people currently living with you for whom you currently provide and will continue to provide at least 50% of their support from July 1, 2019 to June 30, 2020.

DO NOT Include the following:

- Foster Children
- Any child you are paying child support for

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

B. If the Student Marital Status is:

Married

Include the following in the Household

- Yourself (the student)
- Your spouse
 - You are required to provide your spouse's information in all sections of this form and provide verification of tax information for both you and your spouse.
- > Your children IF
 - You will provide more than 50% of the children's support from July 1, 2019 through June 30, 2020 - OR
 - The children attending college would be required to provide parent information when completing the FAFSA
- Other people currently living with you for whom you or your spouse currently provide and will continue to provide more than 50% of their support from July 1, 2019 to June 30, 2020.

DO NOT Include the following:

- Foster Children
- Any child you or your spouse are paying child support for

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

Instructions for completing "ATTENDING COLLEGE"

On your FAFSA application, you were asked to identify the number of people attending college for the 2019 – 2020 aid year. The number in college should include any household member who:

- Will be enrolled at least half-time at an eligible postsecondary education institution at any time between July 1, 2019 and June 30, 2020
- Will be enrolled in a degree, diploma, or certificate program

For each person who meets the above criteria, indicate the name of the college. If the college person is attending UCF – be sure to also list that person's UCF ID.

Section I: Family Information

A. What was your marital status as of the date you first completed the FAFSA?

-

___ Divorced

___Married or Remarried

Separated

Single

___Widowed

Phone: 407.823.2827 • Fax: 407.823.5241 • Web: finaid.ucf.edu | a division of Student Development and Enrollment Services

Section II: Student's Household Size & Number in College

A. You and Your Spouse (If married)

Full Name	Date of Birth	Relationship	If attending college, list: College Name, City, State	UCF ID if attending UCF	Type of Degree Seeking
		Student / Self			
		Spouse			

B. Your Children: List children who will receive more than half of their financial support from you or your spouse, if married, between July 1, 2019 and June 30, 2020, or are required to use your information when completing the FAFSA.

Full Name	Date of Birth mm-dd-yyyy	Relationship	lf attending college, at least half-time list: College Name, City, State	UCF ID if child is attending UCF	Type of Degree Seeking
John Example	01/25/1996	son	UCF Orlando, FL	1234567	BA
1.					
2.					
3.					

C. Other Dependents: List other dependents who live with you and your spouse, if married, AND will receive more than half of their financial support from you and your spouse, if married, between July 1, 2019 and June 30, 2020.

Full Name	Date of Birth mm-dd-yyyy	Relationship	lf attending college, at least half-time list: College Name, City, State	UCF ID if child is attending UCF	Type of Degree Seeking
Jane Example	01/25/1996	niece	n/a	1234567	n/a
1.					
2.					
3.					

Section III: Verification of 2017 Income

A. Were you required to file a 2017 tax return? **Student:** □Yes □No

Spouse (if married):
Yes
No

- If Yes, you must provide the **2017 tax return transcript** or use the **IRS Retrieval Tool**. To request a copy of the transcript, go to <u>www.IRS.gov</u> under "Get your Tax Record" or call 1-800-908-9946.
- If No, each non-filer is required to provide the IRS Verification of Non-Filing Letter. To request this letter, go to www.irs.gov and complete the Form 4506-T.
- B. Complete the section below if you /your spouse did not file and are not required to file a 2017 federal tax return. All Non-Tax Filers must provide a signature on Section VIII, page 4.

List all employer(s) and amounts earned in 2017. If self-employed, list "Self-employed" as the employer and report the income earned. If you (and/or your spouse) did not work at all in 2017, write N/A for name of employer(s).

Non-Tax Filer	Income In 20		Name of Employer	2017 Income Earned	W-2s Attached
			1	\$	
Student:	OYes	ONo	2	\$	
			3	\$	
			1	\$	
Spouse:	OYes	ONo	2	\$	
			3	\$	

A copy of the W-2(s) from each employer must be attached to this form

Section IV: 2016 Other Income

Only complete this section if you or your spouse, if applicable, were <u>not</u> required to file a 2017 tax return.

Annual Amount(s) Received in 2017	Student/Spouse
Food Stamps / SNAP	\$
Foreign Income	\$
Alimony	\$
Housing Assistance	\$
Non-Financial Aid Support from Others (i.e. food, housing, insurance, etc.)	\$
VA Benefits: O Educational O Non - Educational	\$
Worker's Compensation	\$
Other Income	\$

Section V: Family 2017 <u>Untaxed</u> Income

Do not include financial aid, social security benefits, or welfare benefits. Be sure to enter N/A for items that do not apply. Leaving items blank can result in processing delays.

	STUDENT	<u>3F003E</u>
1. Did you or your spouse receive child support for family members (listed in Section II) in 2017 ? Yes- No- If yes, the total amount received in 2017 : <i>(Do not include foster care or adoption payments.)</i>	\$	\$
2. Housing, food, and other living allowances paid in 2017 to members of the military, clergy, and others (including cash payments and cash value of benefits). Do not include the value of on-base military housing or the value of a basic military allowance for housing:	\$	\$
3.Cash received or any money paid on your or your spouse's behalf in 2017:	\$	\$
 4. 2017 Untaxed IRA distribution or pensions/annuities. Check the 2017 tax return for: (IRS form 1040: lines (15a minus 15b) + (16a minus 16b) = untaxed portion) (IRS form 1040A: lines (11a minus 11b) + (12a minus 12b) = untaxed portion) Total untaxed amount received in 2017:	\$ yes/no	\$ yes/no
5. 2017 payments to tax-deferred pension and savings plans (paid directly to or withheld from earnings) such as a 401k and 403b plans. Check student's and spouse's 2017 W-2 forms, box 12a through 12d (Codes D, E, F, G, H, & S). Total amount received in 2017:	\$	\$
		OF ALL 2016 W-2s
6. Untaxed Veterans' 2017 Benefits:		
a. Untaxed <u>Non-Educational</u> Veterans' benefits such as Disability Pension, Death Pension, Dependency & Indemnity Compensation (DIC), etc. Total amount received in 2017 :	\$	\$
b. Untaxed Veteran Administration Education Work-Study Allowances received in 2017:	\$	\$
7. Other 2017 Untaxed Income Not Reported such as workers' compensation or disability. Do not include items such as those listed in <u>Section IV</u> .	\$	\$
ATTACH COPIES OF ALL 2017 W-2 FORMS WHEN REPORTING ITEM #5.		

		STUDENT	<u>SPOUSE</u>
SH, SAVINGS, AND CHECKING ACCO	DUNTS:	\$	\$
		\$	\$
	omes. DO NOT INCLUDE THE HOME YOU LIVE IN.)	0	
		O Yes / O No	When?
Address of Rental property $\rightarrow \rightarrow \rightarrow$			
		\$	\$
c: Qualified tuition plans such as Florida Prepa ucation IRAs, S corporations, partnerships, et	iid and 529s, CDs, trusts, mutual funds, stocks, bonds, c.)	+	·
JSINESS:		•	•
	hinery, etc. Note: Do not report small businesses that you or your	\$	\$
-		\$	\$
: livestock, machinery, land, buildings, equipment	, etc.)	\$	\$
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Your Signature (Student)

Date Signed

Your Spouse's Signature

Date Signed