



# VERIFICATION WORKSHEET

## INDEPENDENT

Student's Name \_\_\_\_\_

UCF ID \_\_\_\_\_

Spouse Name (if married) \_\_\_\_\_

Date \_\_\_\_\_

- Read carefully and complete this verification packet in **black or blue ink**.
- Please refer to your SAR (Student Aid Report) when answering the questions. Any discrepancy may need an explanation and additional 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 and 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?

\_\_\_ Single

\_\_\_ Divorced

\_\_\_ Married or Remarried

\_\_\_ Separated

\_\_\_ Widowed

## 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	If 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	If 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 [www.irs.gov](http://www.irs.gov) 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](http://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 Earned In 2017?	Name of Employer	2017 Income Earned	W-2s Attached
Student:	<input type="radio"/> Yes <input type="radio"/> No	1	\$	<input type="checkbox"/>
		2	\$	<input type="checkbox"/>
		3	\$	<input type="checkbox"/>
Spouse:	<input type="radio"/> Yes <input type="radio"/> No	1	\$	<input type="checkbox"/>
		2	\$	<input type="checkbox"/>
		3	\$	<input type="checkbox"/>

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

Continue to the next page.



## Section VI: Asset Information

Complete every question in this section to report the **net value** of assets as of the day you first completed the FAFSA. The net value is defined as the cash out or sale value minus the debt directly related to the asset. Do not leave any answer blank.

	<u>STUDENT</u>	<u>SPOUSE</u>
<b>CASH, SAVINGS, AND CHECKING ACCOUNTS:</b> .....	\$ _____	\$ _____
<b>REAL ESTATE:</b> ..... (Ex: land, rental property, second and summer homes. DO NOT INCLUDE THE HOME YOU LIVE IN.)	\$ _____	\$ _____
Was rental property sold?.....	<input type="radio"/> Yes / <input type="radio"/> No	When? _____

Address of Rental property → → → → \_\_\_\_\_

<b>INVESTMENTS:</b> ..... (Ex: Qualified tuition plans such as Florida Prepaid and 529s, CDs, trusts, mutual funds, stocks, bonds, Education IRAs, S corporations, partnerships, etc.)	\$ _____	\$ _____
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<b>BUSINESS:</b> ..... (Ex: land, buildings, inventories, equipment, machinery, etc. Note: Do not report small businesses that you or your spouse own and control that has 100 or fewer full time or full time equivalent employees.)	\$ _____	\$ _____
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<b>FARM INVESTMENT:</b> ..... (Ex: livestock, machinery, land, buildings, equipment, etc.)	\$ _____	\$ _____
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Does the family live on a farm?       Yes       No

If the tax return indicates the existence of an asset such as interest, dividends, capital gains, rental real estate, partnerships, and S corporations, and you report a \$0 net value, please provide a written explanation below.

Explanation: \_\_\_\_\_

## Section VII: 2017 Excluded Income Information

Answer the questions below:

- |   |                |               |
|---|----------------|---------------|
| 1. <b>Child support paid in 2017</b> because of divorce or separation or as a result of legal requirements. <b>Do not include support for children already listed in your household</b> (those reported in Section II)..... | <u>STUDENT</u> | <u>SPOUSE</u> |
|   | \$ _____       | \$ _____      |

- Name(s) & age(s) of the children for whom these payments were paid in 2017:

Name	Age	Name	Age

- Name of the person to whom child support was paid: \_\_\_\_\_
- Name of the person who paid child support: \_\_\_\_\_

## Section VIII: Required Signatures

By signing below, you and your parents, certify that all the information in this packet has been read and completed accurately and truthfully.

\_\_\_\_\_  
Your Signature (Student)

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Your Spouse's Signature

\_\_\_\_\_  
Date Signed