

2018-2019 INDEPENDENT VERIFICATION WORKSHEET

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| RETURN FORM TO: Southeastern Oklahoma State University 425 W. University Blvd. Durant, OK 74701 (580)745-2186 Fax: 580-745-7469 Email: financialaid@se.edu | A. Student Information Last name _____ First name _____ M.I. _____ Phone number (include area code): _____ Social Security #: _____ Student ID #: _____ |
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Your application was selected for review in a process called "Verification." We are required to compare information from your application with copies of yours and your spouse's (if applicable) 2016 IRS tax return transcript and/or other financial documents. If needed, SE will submit corrections electronically to the Federal Processor.

Once you submit the requested documents, please do not make any corrections to your FAFSA unless you are instructed to do so by the SE Financial Aid Office.

B. Household Information

List the people that you will support between July 1, 2018 and June 30, 2019. Include:

- Yourself, your spouse, and your dependent children (if you provide more than half of the child's support, or if they would be required to give your information when applying for federal aid). Include other people as part of your family only if they lived with you and received more than half of their support from you at the time you completed your student aid application AND will continue to get more than half of their support from July 1, 2018 through June 30, 2019.

Write the names of ALL household members. Also write in the name of the college for any family member who will be attending college, at least half-time between July 1, 2018 through June 30, 2019, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page with the student's name and ID number at the top.

| Full Name | Age | Relationship | Name of College <i>(If half-time attendance or more during 2018-2019)</i> |
|-----------|-----|--------------|---|
| | | Self | Southeastern Oklahoma State University |
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C. Income Information-If you and/or your spouse did not use the IRS data retrieval option on the FAFSA, please submit a signed copy of yours and/or your spouse's Federal IRS tax return transcript, which can be obtained from the IRS by calling 800-908-9946 or requesting it online at www.irs.gov.

Student's Income Information-Please check one:

- Student filed a 2016 Federal Income Tax Return.
- Student was not employed and had no income from work in 2016. **Must provide Verification of Non-filing Letter from IRS.**
- Student was employed in 2016 and did not file taxes, and is not required to file a tax return. Please complete table below. You are required to attach copies of all 2016 W-2 forms if not filing a federal tax return. List every employer even if they did not issue a W-2 form. **Must provide Verification of Non-filing Letter from IRS.**

| Student's Employer(s) or Source(s) | 2016 Income | Was W-2 issued? |
|------------------------------------|-------------|-----------------|
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Spouse's Income Information-Please check one:

- Spouse filed a 2016 Federal Income Tax Return.
- Spouse was not employed and had no income from work in 2016. **Must provide Verification of Non-filing Letter from IRS.**
- Spouse was employed in 2016 and did not file taxes, and is not required to file a tax return. Please complete table below. You are required to attach copies of all 2016 W-2 forms if not filing a federal tax return. List every employer even if they did not issue a W-2 form. **Must provide Verification of Non-filing Letter from IRS.**

| Spouse's Employer(s) or Source(s) | 2016 Income | Was W-2 issued? |
|-----------------------------------|-------------|-----------------|
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*****ATTN: Non-tax filers MUST provide confirmation of non-filing from the IRS or other relevant taxing authority dated on or after October 1, 2017. If individual never filed a tax return before, he/she can request Letter of Non-filing from the IRS with a form 4506-T (box 7). If individual has filed in previous years Letter of Non-filing may be requested by visiting www.IRS.gov**

D. Additional Financial Information

List the amounts reported for 2016. Do not leave any blank. Enter "0" or N/A.

| FINANCIAL INFORMATION | STUDENT | SPOUSE |
|---|---------|--------|
| Payments to tax-deferred pension and savings plans (W-2 forms, boxes 12a-d, codes D,E,F,G,H,S) | \$ | \$ |
| Child support received | \$ | \$ |
| Housing, food, & other living allowances paid to military, clergy, etc. (exclude on-base housing) | \$ | \$ |
| Veterans non-education benefits | \$ | \$ |
| Worker's and Disability Compensation (exclude Social Security Disability) | \$ | \$ |
| Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships. | \$ | \$ |
| Taxable student grant and scholarship aid reported to the IRS in your adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships. | \$ | \$ |
| Money received, or paid on your behalf (e.g., bills), not reported elsewhere of this form. | \$ | |

E. Certification and Signatures

Each person signing this worksheet certifies that all information reported is complete and correct. The student and parent must sign and date.

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

Student's Signature

Date

Spouse's Signature

Date