

2019-2020 DEPENDENT VERIFICATION WORKSHEET

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 <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Last name</td> <td style="width: 30%; border: none;">First name</td> <td style="width: 20%; border: none;">M.I.</td> </tr> </table> Phone number (include area code): _____ Student ID #: _____	Last name	First name	M.I.
Last name	First name	M.I.		

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 parent’s 2017 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 your parent(s) will support between July 1, 2019 and June 30, 2020. Include:

- Yourself, your parent/stepparent(s), and your parent(s) dependent children (if your parent(s) provide more than half of the child’s support, or if they would be required to give parental information when applying for federal aid). Include other people as part of your family only if they lived with your parent(s) and got more than half of their support from your parent(s) at the time you completed your student aid application AND will continue to get more than half their support from July 1, 2019 through June 30, 2020. Any parent who lives in the household with the student is required to provide all information on the FAFSA, regardless of marital status.

Write the names of ALL household members. Also write in the name of the college for any family member, excluding your parents, who will be attending college, at least half-time between July 1, 2019 through June 30, 2020, 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 2019-2020)</i>
		Self	Southeastern Oklahoma State University

C. Income Information-If you and/or your parent(s) did not use the IRS data retrieval option on the FAFSA, please submit a signed copy of yours and/or your parent(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.

Parent’s Income Information-Please check one:

- Parent filed a 2017 Federal Income Tax Return.
- Parent was not employed and had no income from work in 2017. **Must provide Verification of Non-filing Letter from IRS.**
- Parent was employed in 2017 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 2017 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.**

Parent’s Employer(s) or Source(s)	2017 Income	Was W-2 issued?	
		Yes	No
		Yes	No
		Yes	No
		Yes	No

Student's Income Information-Please check one:

- Student filed a 2017 Federal Income Tax Return.
 Student was not employed and had no income from work in 2017. **Must provide Verification of Non-filing Letter from IRS.**
 Student was employed in 2017 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 2017 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)	2017 Income	Was W-2 issued?	
		Yes	No
		Yes	No
		Yes	No
		Yes	No

*****ATTN: Non-tax filers MUST provide confirmation of non-filing from the IRS or other relevant taxing authority dated on or after October 1, 2018. 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 2017. Please provide documentation for any reported amounts.
Do not leave any blank. Enter "0" or N/A.

FINANCIAL INFORMATION	STUDENT	PARENT(S)
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

 Parent's Signature

 Date