## 2018-2019 Cazenovia College Verification Worksheet - Independent Student

| Student Name: | ID #: |
|---------------|-------|
|---------------|-------|

Your 2018–2019 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 reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

## A. Student's Information

| Student's Last Name                         | First Name | M.I. | Student's Social Security Number         |
|---------------------------------------------|------------|------|------------------------------------------|
|                                             |            |      |                                          |
| Student's Street Address (including apt. #) |            |      | Student's Date of Birth                  |
| City                                        | State      | Zip  | Student's Email Address                  |
|                                             |            |      |                                          |
| Student's Home Phone Number                 |            |      | Student's Alternate or Cell Phone Number |

List below the people in the student's household. Include:

- Yourself, the student.
- The student's spouse, if the student is married.
- The student's or spouse's children if the student or spouse will provide more than half of their support from July 1, 2018, through June 30, 2019, even if the children do not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of their support and will continue to provide more than half of their support through June 30, 2019.

For any household member who will be enrolled <u>at least half time</u> in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2018, and June 30, 2019, include the name of the college.

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

| Full Name | Age | Relationship | College | Will be Enrolled at<br>Least Half Time<br>(Yes or No) |
|-----------|-----|--------------|---------|-------------------------------------------------------|
|           |     | Self         |         |                                                       |
|           |     |              |         |                                                       |
|           |     |              |         |                                                       |
|           |     |              |         |                                                       |
|           |     |              |         |                                                       |
|           |     |              |         |                                                       |
|           |     |              |         |                                                       |

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.

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| Student Name:                                                                                                                                                                                                                                            | ID #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                    |                   |            |  |
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| Verification of 2016 IRS Income Tax Retu                                                                                                                                                                                                                 | ırn Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | for Student Ta                     | x Filers          |            |  |
| Important Note: The instructions below apply to the student aid office if the student or spouse filed separate IRS income to the end of the 2016 tax year on December 31, 2016. If the student returns, 2016 IRS Tax Return Transcripts must be provided | ax returns for 201 dent and spouse i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 6 or had a char                    | ige in marital st | atus after |  |
| <b>Instructions</b> : Complete this section if the student and spouse best way to verify income is by using the IRS Data Retrieval TFAFSA.gov. ) Please see the enclosed FAFSA IRS Data RetrProcesses information sheet for instructions.                | Tool (IRS DRT) th                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | hat is part of FA                  | FSA on the We     | b at       |  |
| Check the box that applies:                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                    |                   |            |  |
| The student <u>has used</u> the IRS DRT in <i>FAFSA</i> on the We into the student's FAFSA.                                                                                                                                                              | eb to transfer 201                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 6 IRS income to                    | ax return inforn  | nation     |  |
| The student <u>has not yet used</u> the IRS DRT in <i>FAFSA on the Web</i> , but will use the tool to transfer 2016 IRS income tax return information into the student's FAFSA once the 2016 IRS income tax return has been filed.                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                    |                   |            |  |
| The student is <u>unable or chooses not to use</u> the IRS DR' school a <b>2016 IRS Tax Return Transcript(s)</b> . (Signate <b>Data Retrieval Tool &amp; IRS Tax Return Transcript Red</b>                                                               | ure not required)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Please see the                     | enclosed FAFS     | A IRS      |  |
| Check here if a 2016 IRS Tax Return Transcript(s) is                                                                                                                                                                                                     | s provided.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                    |                   |            |  |
| Check here if a 2016 IRS Tax Return Transcript(s) w                                                                                                                                                                                                      | vill be provided la                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ater.                              |                   |            |  |
| The student and spouse were not employed and had no file a 2016 IRS tax return.                                                                                                                                                                          | income earned fr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | om work in 201                     | 6 and are not re  | equired to |  |
| The student and/or spouse were employed in 2016 and earned from each employer in 2016, and whether an IR W-2 forms issued to the student and spouse by their em not issue an IRS W-2 form. The student and/or spouse                                     | S W-2 form is prappled place is prappled by S W-2 form is prappled by | ovided. [Provid<br>ery employer ev | e copies of all 2 | 2016 IRS   |  |
| Please list below any other source(s) of income for 2010                                                                                                                                                                                                 | 6 such as Social                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Security, disabi                   | ity, child suppo  | ort, etc.  |  |
| If more space is needed, provide a separate page with the                                                                                                                                                                                                | ne student's name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | e and ID numbe                     | r at the top.     |            |  |
| Employer's Name and/or Other Untaxed Incom                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 016 Amount                         | IRS W-2 Provided? |            |  |
| Suzy's Auto Body Shop (example)                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | rned/Received<br>\$2,000.00        | Yes               |            |  |
| Suz, s rimo Bou, onop (example)                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Ψ2,000.00                          | 100               |            |  |
|                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                    |                   |            |  |
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| Certification an                                                                                                                                                                                                                                         | nd Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                    |                   |            |  |
| Certification and Signature                                                                                                                                                                                                                              | WARNING: If w                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ou purposely give fa               | lse or            |            |  |
| The person signing below certifies that all of the information reported is complete and correct.                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | mation you may be f                |                   |            |  |
|                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                    |                   |            |  |
| Student's Signature                                                                                                                                                                                                                                      | Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                    |                   |            |  |