

## Financial Aid Office 2019-2020 Financial Information Verification Form

The purpose of this form is to verify your 2017 taxable and non-taxable income information. Please complete and return this form to the Financial Aid Office by US Mail or fax (724-852-6312).

	Student Informat	ion			
Tast Name  First Name  M.I.  Social Security Number  Cell Phone  E-mail  Family and College Household Information  Dependent Student: Fill in the information about the people that your parents will support between July 1, 2019 and 30, 2020. List yourself, your parents and other dependents. Include other people only if they now live and get more than half of their support from your parents.  Independent Student: Fill in the information about the people that you will support between July 1, 2019 and June 2020. Include yourself, your spouse and your children if they receive more than half their support from Include others only if they now live with you and get more than half their support from you.  Full Name  Age Relationship College Attending 2019-2020					
Date of Birth Home Phone Number Cell Phone E-mail  Family and College Household Information  Dependent Student: Fill in the information about the people that your parents will support between July 1, 2019 and 30, 2020. List yourself, your parents and other dependents. Include other people only if they now live and get more than half of their support from your parents.  Independent Student: Fill in the information about the people that you will support between July 1, 2019 and June 2020. Include yourself, your spouse and your children if they receive more than half their support from Include others only if they now live with you and get more than half their support from you.  Full Name  Age Relationship College Attending 2019-2020					XXX-XX-
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Full Name Age Relationship College Attending 2019-2020					
	include others only if	tney now live with you and	a get more tr	nan nair their <i>support</i> r	rom you.
You, the student Waynesburg University	Full Name		<u>Age</u>	<u>Relationship</u>	College Attending 2019-2020
				You, the student	Waynesburg University
					-

## Federal Tax Forms and Income Information (all applicants)

The best way to verify income is by using the *IRS Data Retrieval Tool* (IRS DRT) that is part of the *FAFSA on the Web* at <u>FAFSA.gov</u>.

If you cannot use *IRS DRT*, Attach a <u>signed</u> copy of the **2017** Federal Income Tax Return or 2017 Federal IRS Tax Return Transcripts for you, your parent(s) (if dependent) or your spouse (if married).

You can obtain an IRS Tax Return Transcript (NOT Tax Account Transcript) at <a href="www.irs.gov">www.irs.gov</a> or by calling 1-800-908-9946. If you did not file a federal tax return, fill in the information below and submit a copy of all of your Federal W-2 forms and verification of non-filing status.

Please note that the verification process will not be complete until the FAFSA is (re)submitted using the IRS data retrieval function on the FAFSA website or all required Tax Transcripts are received by the Financial Aid Office.

Nontax Filers*								
If you and/or your parent(s) (dependent student), or you and/or your spouse (independent student) did not file and are not required to file a 2017 Federal income tax return, check the boxes below that apply.								
a. I (We) did not file and are not required to file a 2017 Federal income tax return.  Dependent Student: You Father Mother Independent Student: You Vour Spouse								
b. If you or your parents did not file and are not required to file a 2017 Federal tax form, list below you and your parent(s) (dependent student) or your and your spouse's (independent student) employer(s) and any income received in 2017, (use the W-2 form or other earnings statements if available). Please submit a copy of the W-2 form to the Financial Aid Office.								
*Parent nontax filers and income of non-filing from the IRS date checking box 7.	•	-		on				
Your (the student) and your spouse's Employer(s)	Amount(s)	Your Parents' Employer(s) (dependent students)	Amount(s)					
	\$ .00		\$ .00	)				
	\$ .00		\$ .00	)				
2017 Untaxed Income: *Enter "0"	if the answer is "non	e". Do not leave any items blank.						
Student/Spouse* Parent(s)*								
\$ Child support received fo	r all children. <b>Don't i</b> i	nclude foster or adoption payments.	\$					
\$Untaxed portions of IRA distributions from IRS Form 1040-lines (15a minus 15b) or 1040A-lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.								
Untaxed portions of pensions from IRS Form 1040-lines (16a minus 16b) or 1040A-lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.								
\$ Housing, food and other living allowances paid to members of the military, clergy and others \$ (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.								
Sign This Form								
Each person signing this form certifies  Dependent Student: Student and one				ional.				

Date

Parent's Signature or Spouse's Signature

Date

Student's Signature