STANDARD V1 / V6 Verification



INDEPENDENT
2014-2015
Federal Student Aid Program

Read all instructions carefully to ensure this worksheet and document requirements are submitted in their entirety. <u>All sections must be answered</u>. If not applicable, note 'n/a.'

Your application was selected for review in a process called "Verification."

In this process, UAH will be comparing information reported on your FAFSA application to the required documents submitted. The Dept of Education requires that we verify this information before awarding federal financial aid. If there are differences between your application information and your financial documents, our office will make an electronic correction on your FAFSA application.

Submit verification documents as soon as possible to eliminate any delay in the processing of your application.

Review your account status on a regular basis at https://register.uah.edu

Any question regarding this worksheet or its required documents will be communicated via the student's UAH email account.

UAH Office of Student Financial Services 301 Sparkman Drive, UC 212, Huntsville, Alabama 35899

Phone (256) 824-6650	Fax (256) 824-6212	Email financialaid@uah.edu	Website http://f	financialaid.uah.edu	
STUDENT INFORMATION: PL	EASE PRINT	UAH Student A# or Socia	I Security #		
Last Name		First Name	MI	Date of Birth	

- **A. HOUSEHOLD INFORMATION:** Write the names of all your household members below:
- List yourself, and
- List your spouse, if you are married, and
- List your children and your spouse's children, if
 - (A) you and your spouse provide more than 50% of their financial needs OR
 - (B) if a child is required to provide parental information when applying for federal student aid.
 - Exclusion: Do not list children to whom child support is paid, child support is reported in Section B of this worksheet,
- List any other people who now live with you <u>and</u> you provide 50% or more of their financial support **and** will continue to provide more than 50% of their financial needs from July 1, 2014 through June 30, 2015.
- Write the name of the college for household members attending college at least half time, between July 1, 2014 and June 30, 2015. If you need additional space, attach a separate page.

Household Members	Age	Relationship	Attending College at least half time Fall 2014-Summer 2015
Your Name		Self	UAH
	·		

B. CHILD SUPPORT PAID by a member of housel Please note N/A if this does not apply to a m Child support paid by student and/or spouse listed in S	ember of	f the household listed in S	ection A.
Individual the child support was paid to, not listed in So		·	
Names of children supported by child support paymen	t . These	children should not be liste	ed in Section A of this worksheet.

C. STUDENT and SPOUSE EARNED INCOME. Circle YES or NO to the following questions.

If cash earnings were received, Submit a written statement of the total amount earned in 2013 with this worksheet.

Did you, the student work in 2013? Yes / No Did your spouse work in 2013? Yes / No N/A
If you answered yes to either question, you are required to submit copies of all 2013 W2's, Schedule C, F, K and/or Form 1065.

D. STUDENT and SPOUSE TAX FILING STATUS. Circle YES or NO to the following questions.

Did you OR will you file a 2013 federal tax return?

Yes / No

Did your spouse OR will your spouse file a 2013 federal tax return?

Yes / No N/A

If Yes, was the IRS Data retrieval tool used when completing the FAFSA?

Yes / No

If the data retrieval tool was not used, you are required to submit a copy of your and/or your spouse's 2013 federal tax return transcript. A copy of the 1040 return is not acceptable documentation.

Go to https://irs.gov to obtain a pdf format of the required 2013 tax return transcripts or IRS Non filing statement.

E. 2013 CALENDAR YEAR UNTAXED BENEFITS: <u>Do not leave blanks</u>. Enter zero for those benefits that do not apply to you. This information is not reported in your 2013 tax return. Amounts should be reported in annual increments.

DO NOT INCLUDE UNTAXED SOCIAL SECURITY BENEFITS	STUDENT	SPOUSE
Tax deferred pensions and savings plans paid directly to or withheld from earnings. For amounts withheld from earnings, go to Box 12 of your 2013 w2's. Report amounts coded D, E, F, G, H, S. Amounts paid directly must also be reported as untaxed income.	\$	\$
Child Support RECEIVED for all Children. Do NOT include foster care	\$	\$
Housing, food, and other living allowance paid to members of the military, clergy, and others (including cash payments and cash value of benefits)	\$	\$
Veterans' non-education benefits, such as Disability, Death Pension or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study Allowances	\$	\$
Other untaxed income or benefits not reported elsewhere, such as workers compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, disability, etc. Do NOT include student aid, WIA educational benefits, or benefits from flexible spending arrangements	\$	\$
Cash received or money paid on your behalf (bills) not reported elsewhere on this form	\$	\$
Money received or paid on your behalf, includes 529 plan that is owned by someone other than your parent (such as grandparent, aunt, or uncle)		
Taxable earnings earned from Federal Work Study or other need-based programs	\$	\$
SNAP/ food stamp benefits received by a member of the household on page 1, in 2013.	Yes or No	Yes or No

F. STATEMENT OF SUPPORT.

If you and your spouse did not file a federal income tax return and you and your spouse answered "0" to all questions in Section E, please describe below how you and your spouse supported yourselves in 2013 and will support yourselves in 2014. If you need more space, please attach a separate page. A copy of documentation to support this statement is recommended.

WARNING: If you purposely give false or misleading info	rmation on this worksheet	, you may be fined, sentenced to jail, or both.	
By signing this Verification Worksheet, u	we certify that all the in	formation reported is complete and correct.	
Student's Signature (required)		Spouse's Signature (optional)	Date