



Name _____

Empl ID _____

Date _____

2018-2019 INDEPENDENT VERIFICATION WORKSHEET (FAVFIO)

Your application was selected for review in a process called “Verification.” In this process, the school will be comparing information from your Free Application for Federal Student Aid (FAFSA) with information from the finalized 2016 tax data, W-2 forms, and/or other financial documents. If there are differences between your FAFSA and your financial documents, the school will send corrections electronically, to have your information reprocessed.

You are required by law to provide all necessary documents to complete Verification. Failure to comply will result in a non-disbursement of any potential grant funding.

A. STUDENT INFORMATION

Address (include apt. no.) _____ Date of Birth

City State Zip Code _____ Phone number (include area code)

B. FAMILY/HOUSEHOLD INFORMATION

a. Your Spouse:

<i>Full Name</i>	<i>Age</i>	<i>Relationship</i>	<i>College</i>

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

b. Dependents:

- Dependent children **under the age of 24** (if you provide more than half support or if you would be required to give parental information when applying for Federal student aid.)
- Also write in the name of the *COLLEGE* for any dependents (*excluding your dual enrolled students*) who will be attending COLLEGE at least half-time between July 1, 2018 and June 30, 2019 and will be enrolled in a degree or certificate program.

<i>Full Name</i>	<i>Age</i>	<i>Relationship</i>	<i>College</i>

c. Other Member(s) (Include other people as part of your family only if):

- They lived with you and received more than half their support from you at the time you completed your student aid application.
- They will continue to get more than half their support from July 1, 2018 through June 30, 2019.

** Please provide supporting documentation or notarized personal statement*

<i>Full Name</i>	<i>Age</i>	<i>Relationship</i>	<i>Claimed on Student 2015 Taxes?</i>	<i>College</i>

C. STUDENT & SPOUSE TAX FORMS AND INCOME INFORMATION

INDEPENDENT

Please read carefully and follow the instructions below:

2016 Federal Tax filing status:

Student: Already Filed or Will File Not Required to File

Spouse: Already Filed or Will File Not Required to File

Federal Tax Filers:

Update your FAFSA tax information using the IRS Data Retrieval Tool in the FAFSA correction process. Florida State University will receive your updated tax information. Please ensure your FAFSA is **submitted (not saved)**.

If you choose not to use the IRS Data Retrieval Tool, or if you do not meet the criteria to use the IRS Data Retrieval Tool, you will need to request a 2016 **Tax Return Transcript** from the IRS and submit it to the Office of Financial Aid.

Non-Filers:

If you are not required to file, but earned income in 2016, complete a non-filer statement and attach your W2(s). “2018-2019 Non-Filer Statements” can be located at <http://financialaid.fsu.edu/forms>.

D. UNTAXED INCOME - Complete this section for both student and spouse amounts. If not applicable put in Zero (0).

2016	Student	Spouse
Tax-deferred pension/savings (paid directly to or withheld from earnings, such as 401k and 403b plan): W2, BOX 12 a-d CODE: D,E,F,G,H,S: (when looking at the W2, only include codes listed above)	\$ _____ (Annually)	\$ _____ (Annually)
Child support Received:	\$ _____ (Annually)	\$ _____ (Annually)
Housing, Food, Other living allowances for military/clergy:	\$ _____ (Annually)	\$ _____ (Annually)
Veteran’s Non-educational benefits (disability, Death Pension, DIC):	\$ _____ (Annually)	\$ _____ (Annually)
Other Untaxed Income Not Reported (Worker’s comp, disability, etc.):	\$ _____ (Annually)	\$ _____ (Annually)
Money received or paid on your behalf not reported elsewhere (paid by other than custodial parent):	\$ _____ (Annually)	\$ _____ (Annually)

E. SIGN THIS WORKSHEET

By signing this worksheet, we certify that all the information reported to qualify for Federal student aid is complete and correct. We also acknowledge that verification may result in a change in my current award package.

Student Signature

Date

Spouse Signature

Date

Florida State University’s Use of Social Security Number policy is available at http://registrar.fsu.edu/bulletin/undergraduate/information/university_notices/

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Verification Group(s):
V1, V5, V6