



THE MASTER'S  
UNIVERSITY

## 2017 - 2018 Federal Verification Worksheet

### WHAT IS VERIFICATION?

Your application was selected by the U.S. Department of Education for review in a process called "Verification". The Office of Financial Aid must compare your FAFSA with the information you provide on this worksheet and other financial documents. If there are differences between your application information and the documents you submit, your application may need to be corrected. The Office of Financial Aid cannot make any federal financial aid payments available to you or process a student loan request until all verification requirements have been met and the necessary corrections have been made.

### WHAT ARE THE STEPS?

1. Complete the IRS Data Retrieval through FAFSA. (Visit our website [www.masters.edu/verify](http://www.masters.edu/verify) for more information).
2. If you cannot complete Step 1, you may order a TAX RETURN TRANSCRIPT from the Internal Revenue Service online at [www.irs.gov](http://www.irs.gov) or by phone at 1-800-908-9946. Obtain a 2015 Federal IRS Tax Return Transcript and W-2 forms for yourself, your spouse (if married) or your parents/step-parent (if dependent).
3. Fill in and sign this worksheet – you or at least one parent (if dependent) must sign the form. The form can be completed by hand with black or blue ink, or completed electronically (signature must be in handwriting).
4. Review your Student Aid Report (SAR), Missing Information letters from the Office of Financial Aid, and the second page of this worksheet to see if you need to submit other documentation (such as a default clearance letter, citizenship documentation, proof of receipt of food stamps (SNAP and TANF), proof of child support paid, social security card, etc.)
5. Sign & Submit a Satisfactory Academic Progress Policy (Visit our website [www.masters.edu/downloads](http://www.masters.edu/downloads)).
6. After a financial aid representative reviews your information, you could be asked to submit additional documentation. When all the information has been reviewed and any necessary corrections made, you will be notified about your financial aid awards and payments.
7. If you filed an extension, filed an amended return, were a victim of tax-related identity theft, or filed non-IRS income tax return, please visit [www.masters.edu/verify](http://www.masters.edu/verify) for instructions about sending in additional documentation.

### A. STUDENT AND FAMILY INFORMATION

Social Security Number:	<input type="text"/>	Last Name:	First Name:	MI
Address:	City:	State:	Zip:	
Date of Birth:	Phone Number:			

**INDEPENDENT STUDENTS:** List the people that you (and your spouse) will support between July 1, 2017 and June 30, 2018. Include yourself, your spouse, and your dependent children. Include other people only if they now live with you and you provide more than half their support and will continue to provide more than half their support from July 1, 2017 – June 30, 2018. Exclude children/siblings whom are wards of the state, i.e. foster care.

**DEPENDENT STUDENTS:** List all the people in your household between July 1, 2017 and June 30, 2018. Include yourself, your parents, and your parents' other children if (a) your parents provide more than half of their support or (b) the children would be required to provide parental information when applying for Federal Student Aid. Include other people only if they now live with your parents and receive, and will continue to receive, more than half their support from them between July 1, 2017 and June 30, 2018. Exclude children/siblings whom are wards of the state, i.e. foster care.

**INDEPENDENT AND DEPENDENT:** Write the name of the college for any family member who will be attending college at least half-time between July 1, 2017 and June 30, 2018 and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

NAME	AGE	RELATIONSHIP	COLLEGE
		Self	The Master's University

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## B. STUDENT'S (AND SPOUSE'S) INCOME AND BENEFITS INFORMATION

Check the appropriate boxes below and provide the requested information and documents:

- ☐ I used the IRS Data Retrieval Tool (after my 2015 taxes were completed and processed by the IRS) to transfer my 2015 income information to the FAFSA and made no further changes to the information.
- ☐ I did not (or could not) transfer my 2015 income information to the FAFSA using the IRS Data Retrieval Tool. I have attached a copy of my **2015 IRS Tax Return Transcript(s)**. (Only use if the IRS Data Retrieval failed to load completed and processed taxes).
- ☐ I was not required to file a 2015 Federal Income Tax Return. [Attach your **W-2 Forms** from all sources of earned income. Please list sources and amounts of any earned income received in 2015 for which there is no W-2. (Enter "No Job" under "Employer Name," if you did not work).]

EMPLOYER NAME	2015 AMOUNT EARNED
	\$
	\$

- ☐ In 2014 or 2015, I received **food stamps (SNAP)** benefits. [Attach a copy of your EBT pay history or a photocopy of your food stamps (SNAP) card.]

- ☐ I paid **child support** in the amount of \$\_\_\_\_\_ in the year 2015 to \_\_\_\_\_ residing at \_\_\_\_\_  
(yearly total) (name of child support recipient(s))  
\_\_\_\_\_ for the following children: \_\_\_\_\_  
(recipient's address) list name of each child

## C. PARENT'S INCOME AND BENEFITS INFORMATION

Check the appropriate boxes below and provide the requested information and documents:

- ☐ I used the IRS Data Retrieval Tool (after my 2015 taxes were completed and processed by the IRS) to transfer my 2015 income information to the FAFSA and made no further changes to the information.
- ☐ I did not (or could not) transfer my 2015 income information to the FAFSA using the IRS Data Retrieval Tool. I have attached a copy of my **2015 IRS Tax Return Transcript(s)**. (Only use if the IRS Data Retrieval failed to load completed and processed taxes).
- ☐ I was not required to file a 2015 Federal Income Tax Return. [Attach your **W-2 Forms** from all sources of earned income. Please list sources and amounts of any earned income received in 2015 for which there is no W-2. (Enter "No Job" under "Employer Name," if you did not work).]

EMPLOYER NAME	2015 AMOUNT EARNED
	\$
	\$

- ☐ In 2014 or 2015, I received **food stamps (SNAP)** benefits. [Attach a copy of your EBT pay history or a photocopy of your food stamps (SNAP) card.]

- ☐ I paid **child support** in the amount of \$\_\_\_\_\_ in the year 2015 to \_\_\_\_\_ residing at \_\_\_\_\_  
(yearly total) (name of child support recipient(s))  
\_\_\_\_\_ for the following children: \_\_\_\_\_  
(recipient's address) list name of each child

## D. CERTIFICATION

I certify that all the information reported to qualify for Federal student aid is complete and correct.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Electronic signatures are not accepted

Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Electronic signatures are not accepted

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Electronic signatures are not accepted