

## 2018-2019 Verification Worksheet

This form may be submitted via email, mail, fax, or in person

**SECTION 1: STUDENT INFORMATION** 

Office of Financial Aid 1950 Third Street La Verne, CA 91750 Phone: (800) 649-0160 Fax: (909) 448-1629 finaid@laverne.edu

Your 2018-2019 Free Application for Federal Student Aid (FAFSA) was selected for a process called "Verification". The law says that before awarding Federal Student Aid, University of La Verne must compare your FAFSA with the information on this worksheet and other required documents. We cannot process your financial aid until you submit all the required verification documents. Failure to complete the verification process in a timely matter may result in the loss of aid.

Last Name	First Name		La Verne ID or SSN		
Street Address (include apt. no.)			Cell Phone # or Alternate Phone #		
City	State	Zij	Zip Code		
SECTION 2: FAMI	LY INFORMATION				
DEPENDENT STUDEN	TS	IN	INDEPENDENT STUDENTS		
List below the people in the parents' household including:		g: Li	List below the people in the students household including:		
<ul> <li>The student.</li> <li>The parent(s) (including a stepparent) even if the student doesn't live with the parent(s).</li> <li>The parents' other children if the parent(s) will provide more than half of the children's support from July 1, 2018 through June 30, 2019, or if the other children would be required to provide parental information if they were completing a FAFSA for 2018–2019. Include children who meet either of these standards even if the children do not live with the parent(s).</li> </ul>		more rough d to	<ul> <li>The student's spouse, if the student is married.</li> <li>The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2018, through June 30, 2019, even if the children do not live with the student.</li> </ul>		
• Other people if they reparent(s) will provide	now live with the parent(s) and the e more than half of their support an ween July 1, 2018 and June 30, 20	nd will			

## Please list all members currently in the household

Full Name	Age	Relationship	College (if applicable) in 2018-2019*	
		Self	University of La Verne	



Student's Signature

## 2018-2019 Verification Worksheet

La Verne ID:		

## SECTION 3: STUDENT 'S TAX AND INCOME INFORMATION (check one)

TAX FILERS ONLY  ☐ Successfully used IRS Data Retrieval Tool to import my							
☐ Attached is my 2016 Federal Tax Return Transcript from the IRS							
☐ I have been granted a filing extension beyond the automac six-month extension for the tax year 2016. Attached is a							
	completed 2018-2019 Extension Form along with required documents.						
☐ I filed an amended IRS income tax return for tax year 2016, attached are a 2016 IRS Tax Transcipt, and a signed copy of the IRS form 1040X that was filed with the IRS.							
NON TAX FILERS ONLY IRS income tax return was not filed with the IRS. (If you are a dependent)							
☐ I worked but did not file taxes. Attached are copies of	of all my 2016 W-2s or						
☐ I was not employed in 2016 and had no income earned in 2016							
Listed below are all my sources of income and financial support such as employment income, cash support, disability,							
social security, etc.							
Source Source Source	re Amount						
Source Amount Source	e Amount						
SECTION 4: PARENT(S) OR MARRIED STUDE NT'S SPOUSAL TAX AND INCOME							
DEPENDENT STUDENTS	INDEPENDENT STUDENTS						
If your parent(s) (including stepparent) are married or your	If you are married but did not file a joint federal tax return,						
biological parents are unmarried but live together, you must							
submit income information for <b>both</b> parents.							
TAX FILERS ONLY							
☐ Successfully used IRS Data Retrieval Tool to import my	parent(s) income information on the FASFA						
☐ Attached are my parent(s)/spouse 2016 Federal Tax Retu	• • • •						
☐ I have been granted a filing extension beyond the autom							
a completed 2018-2019 Extension form along with requi	· · · · · · · · · · · · · · · · · · ·						
☐ I filed and amended IRS Income Tax Return for tax year	2016, attached are a 2016 IRS Tax Return Transcript, and a						
signed copy of the 2016 IRS form 1040x that was filed w	vith the IRS.						
NON TAX FILERS ONLY Submit an IRS Verification of Nor	n-filing Letter dated on or after October 1, 2017 that indicates a 2016						
IRS income tax return was not filed with the IRS.							
☐ My parent(s)/spouse worked but did not file taxes. Attached are copies of all my 2016 W-2s							
	☐ My parent(s)/spouse were not employed in 2016 and had no income						
	Listed below are all my sources of income and financial support such as employment income, cash support,						
☐ My parent(s)/spouse were not employed in 2016 and							
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☐ My parent(s)/spouse were not employed in 2016 and Listed below are all my sources of income and financial disability, social security, etc.    Source Amount Source Amount Source Amount Source Source Source Amount Source Source Source Amount Source Source Source Amount Source Source Source Source Amount Source	ial support such as employment income, cash support,  ce Amount  ce Amount  form. By signing this worksheet, I (we) certify that all the information reported trequired to file or will not file) I (we) certify that I (we) are not required to on guidelines, I (we) understand that purposely giving false or misleading						

Date

Parent Signature (Dependent Students Only)

Date