

## Pacific Lutheran University 2018-2019 Verification Worksheet - IndependentV1

Your FAFSA has been selected by the Federal Student Aid processor for a review process called verification. Financial Aid pro-gram regulations (34 CFR, Part 668) require schools to check the accuracy of information provided on a selected 2018-19 FAFSA and send to the Federal Student Aid processor any necessary corrections identified in the verification process. Your current aid offer is not final and all need-based Student Aid cannot be disbursed until verification has been completed.

Student's Name: \_

PLU ID #:\_\_\_\_\_

Student phone #:

Student's email Address:

## 1. FAMILY/HOUSEHOLD & COLLEGE INFORMATION

Yourself (Include your spouse if living together, regardless of marital status)

Your children, if you will provide more than half of their support from July 1, 2018 through June 30, 2019, even if they do not live with you.

Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2018 through June 30, 2019.

Write the name of the colleges where family members will attend at least half-time between July 1, 2018 and June 30, 2019. Do **NOT** report college if student is enrolled in Running Start (or any program where student attends college prior to graduating from high school.

Name	Age	Relationship	College
Lute Spouse (example)	xample) 23 spouse Lute Univer		Lute University
		Self	Pacific Lutheran University

If you need more space, attach a separate page.

2. CHILD SUPPORT PAID							
In 2016, did you or your spouse <b>PAY</b> child support? If Yes, please complete the following:	Yes No						
1. The amount of child support paid for all children, Jan. 1, 2016 through Dec. 31, 2016: \$							
2. The name of the person to whom the child support was paid:							
3. Child support was paid for:							
Name & Age Name & A	Age Name & Age						

If you or your spouse (if yo	u have one) were required to file a 2016 U.S. tax return,	this information must be provided to us via:	
1.) The Federal IRS Data I	Retrieval process at www.fafsa.gov or,		

2.) On a Tax Return Transcript from the IRS website at <u>http://www.irs.gov/Individuals/Order-a-Transcript</u>. The IRS cannot provide a 2016 Tax Return Transcript if the tax filer:
1. Filed or will file an Amended 2016 Tax Return,
2. Was a victim of identify theft, or
3. Filed "Married, filing separately"

If the IRS cannot provide a Tax Return Transcript because of one of these conditions apply, please contact us for assistance.

3. STUDENT'S (& SPOUSE, IF APPLICABLE) TAX & INCOME INFORMATION (check only one box below)

A.) I have provided my 2016 U.S. Federal tax return information (1040, 1040A, 1040EZ) using the IRS Data Retrieval Tool via the on-line FAFSA application **NOTE:** This is an option only if your IRS data was successfully transferred to your FAFSA **or**,

B.) I have attached a copy of my 2016 U.S. Federal **Tax RETURN Transcript** downloaded from the IRS, (Note: Account Transcripts are NOT acceptable. If the IRS **cannot** provide your Tax Return Transcript, send us that notice with a photocopy of your **signed**, original return) or,

C.) I did not file, and am not required to file. If you worked but did not file, please list below your employer(s) and any earned income in 2016. If you did not work, enter **\$0** for amount earned and "none"

Employer(s) This section must be completed if you checked box C. above	2016 Amount Earned	W-2 Attached?	
	\$	Yes	No, explain below
	\$	Yes	No, explain below
	\$	Yes	No, explain below

Attach a W-2 for each employer checked "Yes" above. Please provide an explanation below if W-2 was not issued.

## 4. FOOD STAMPS

In	201	5 0	or 2016	did a	anvone in	vour	household	l receive	Food	Stamps?
111	201	20	<i>n</i> 2010,	, uiu a	anyone m	your	nousenoic		1 000	Stamps:

No

Yes

If YES, please provide a copy of your food stamp card or a statement from the Dept. of Social and Health Services from 2015 or 2016 that shows receipt of food stamps.

## 5. SIGN THIS WORKSHEET

By signing this worksheet, we certify that all the information reported on this worksheet is complete and correct.

Student

Spouse

Date

Date

Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Return this form to: Student Financial Services | 12180 Park Ave. S. Tacoma, WA 98447 | phone: (253)535-7161 | FAX: (253)535-8406 | www.plu.edu/financial-services