



2018-2019 Dependent Student Verification Worksheet

Your 2018-2019 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. Federal law requires us to ask you to confirm the information you and/or your parents reported on your FAFSA. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the worksheet and other required documents to the Samford Office of Financial Aid. This process will take 45 to 60 days to complete once submitted to Samford. The results of this process will be reported on a new financial aid award letter. **We will not be able to process any federal, state or need-based aid until the process is complete.** If you have questions about verification, contact the Samford Office of Financial Aid as soon as possible in order to avoid delays.

A. Dependent Student's Information (please print)

Student's Last Name	Student's First Name	Student's M.I.	900 _____ Student's Samford ID
Student's Street Address (include apt. no.)			Student's SSN
City	State	Zip Code	Student's Date of Birth
Student's Home Phone # (include area code) / _____		Cell Phone # _____	Student's Email Address _____

B. Dependent Student's Family Information

List below the people in your parent(s)' household. Please include:

- Yourself,
- Your parent(s) (Including stepparent in the household). This is the parent who provides more than 50% of your support, even if you live on your own,
- Your parent(s)' other children if your parent (s) will provide more than 50% of their support from July 1, 2018, through June 30, 2019, or if they would be required to provide parental information if they were completing the FAFSA for 2018-2019. Include all children who meet one of these standards, even if they live on their own, and
- Other people if they now live with your parent(s) and your parent(s) provide more than 50% of their support and will continue to do so through June 30, 2019.

Please also include the name of the college for any household members (siblings only) who will be attending college at least half time between July 1, 2018 and June 30, 2019, and will be enrolled in a degree, diploma, or certificate programs. Please list additional household members on an attached separate page if there is not enough space below.

Full Name	Age	Relationship	College	Will Be Enrolled At Least Half-Time
Bill Smith (example)	21	Brother	Samford University	yes
		Self	Samford University	

C. Student and Parent(s) Income Information and Tax Forms

Step 1. Did you file a 2016 U.S. Federal Tax Return? Please check only one box below.

Note: If you are unsure whether or not you successfully used the IRS Data Retrieval Tool, or have questions about which tax documents you are required to submit, please log on to the Samford portal and view your Financial Aid Requirements.

Student Parent(s)

- Yes, I used the IRS Data Retrieval Tool to directly import my income information into the FAFSA.
- Yes, but I did not use the IRS Data Retrieval Tool. If requested by Samford, you may obtain a copy of your 2016 U.S. Tax Return Transcript by going to www.IRS.gov or calling 800-908-9946. Filing a request online will expedite the process.
- No, I did not file and I am not required to file a 2016 U.S. Tax Return. List your employer(s) and income received in 2016 below and submit copies of all 2016 W-2s. If you did not receive W-2s for work performed, initial here _____.

2016 Employer/Source of Income (if none, list zero or n/a)	Name of Employee	2016 Income

Step 2. List the following amounts regarding 2016 untaxed income and additional financial information.

Amount for Student	Untaxed Income	Amount for Parent
	Taxable earnings from need-based employment programs such as Federal Work Study.	
	Money that was received, or paid on your behalf (bills), not reported elsewhere on this form.	
	Other untaxed income such as SNAP benefits. Please explain on a separate page and provide 2015 & 2016 docs.	

Step 3. List the following amounts regarding 2016 child support paid or received by members of your household.

Name of person who paid child support	Name of person to whom child support was paid	Name of child for whom child support was paid	Amount of child support paid in 2016

**** Attach a separate sheet listing any additional children for whom you paid or received child support and the corresponding amounts.**

D. Certification

By signing this worksheet, I/(we) certify that all the information reported within is complete and correct. If I purposefully give false, misleading or incomplete information on this worksheet, I understand that I may be fined, sentenced to jail or both by the U.S. Federal Government.

Student's Signature (required)

Date Signed

Parent's Signature (required)

Date Signed

Do not mail this worksheet to the U.S. Department of Education. Please submit this worksheet along with all required documentation to:

Samford University
Student Financial Services
800 Lakeshore Drive, Birmingham, AL 35229
Phone: (205) 726.2905 Fax: (205) 726.2738 Email: sfs@samford.edu

For office use only. Please do not write in this box. - Notes regarding completed verification: