Endicott College Verification Worksheet 2013-2014

A. Student Information

Last Name:_____ First Name:_____ MI:_____

Social Security #:_____-_____-_____ Endicott ID #: _____

Address: _____ Email:_____

Cell Phone: _____ DOB:_____

Please indicate the campus you attend:

☐ Endicott Main Campus ☐ Van Loan School of Graduate and Professional Studies

B. Family Information

Please check the box that indicates your current status. List other people as part of your household only if they now live with you (if independent) or your parents (if dependent) AND you, or if your parents provide more than half of their support AND will continue to provide more than half of their support from July 1, 2013 through June 30, 2014.

☐ Dependent Student *

List below the people in your parent(s)' household,
-Including yourself and your parent(s) (including a stepparent) even if you don't live with your parent(s).
-Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2013, through June 30, 2014, or if the other children would be required to provide parental information if they were completing a FAFSA for 2013-2014. Include children who meet either of these standards, even if they do not live with your parent(s).
Other people if they now live with your parent(s) and your parents(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2014.

A student is considered dependent if he/she was required to provide parental data on the *Free Application for Federal Student Aid (FAFSA).

☐ Independent Student**

List below the people in your household include:
-Yourself.
-Your spouse, if you are married.
-Your children, if any, if you will provide more than half of their support from July 1, 2013, through June 30, 2014, or if the child would be required to provide your information if they were completing a FAFSA for 2013-2014. Include children who meet either of these standards, 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 through June 30, 2014.

*****A student is considered independent if he/she was not required to provide parental data on the Free Application for Federal Student Aid (FAFSA).***

******Please Note: We will be requiring confirmation of the number in college at a later date.***

Full Name	*Age*	*Relationship*	*College*	*Enrolled at least half time*
Missy Jones (example)	*18*	*Self*	*Endicott College*	*Yes*

C. Student Tax Forms and Income Information

1. Check one of the appropriate boxes below:

☐ I/we have enclosed the official IRS Transcript of our 2012 federal tax return (attach 2012 W-2's).

☐ I/we will use IRS Data Retrieval Tool in FAFSA to update our FAFSA Form (attached 2012 W-2's).

☐ I/we will not and are not required to file a 2012 U.S. Income Tax Return.
Income earned from Work: $_____Attach 2012 W-2's

D. Parent Tax Forms and Income Information for Dependent Students

1. Check one of the appropriate boxes below:

☐ I/we have enclosed the official IRS Transcript of our 2012 federal tax return (attach 2012 W-2's).

☐ I/we will use IRS Data Retrieval Tool in FAFSA to update our FAFSA Form (attach 2012 W-2's).

☐ I/we will not and are not required to file a 2012 U.S. Income Tax Return
Income earned from Work: $_____ Attach 2012 W-2's

E. Untaxed Income, Benefits and Income Exclusions:

Income Source/Exclusions)	Parent	Student (If Independent)
Child support received for all children.	$	$
Food Stamps received from the Supplemental Nutrition Assistance Program (SNAP) will provide documentation	$	$
Workman's Compensation	$	$
Child support you paid because of divorce, separation, or legal arrangement. Do not include child support for children in your or yours parents' household as listed in Section B. Name of person who Paid Child Support: _____ Name of Person to Whom Child Support was Paid: _____ Name of Child for Whom Support was Paid: _____	$	$
Untaxed Pensions	$	$

F. Sign This Worksheet

By signing this worksheet, I (we) certify that all of the information reported to qualify for federal financial aid is complete and correct. I (we) understand that giving false or misleading information on this worksheet can result in a fine, jail sentence, or both. (At least one parent must sign this form if dependent; if married, spouse must also sign.)

_____ _____ _____ _____
Student Signature Date Spouse of Student Signature (if married) Date

_____ _____
Parent Signature Date