

2015–2016 Aggregate Verification Worksheet V5-Dependent Student

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called "Verification". The Financial Aid Office at your college must compare information from your FAFSA with information you provide on this worksheet and with any other required documents. If there are differences, your Financial Aid Office may require additional documentation and/or your FAFSA information may need to be corrected. You may not receive federal financial aid until all verification requirements are met and the necessary corrections made.

What You Should Do

- If you or your parent(s) are tax filers, obtain a 2014 IRS Tax Return Transcript for yourself, and your parent(s). The Financial Aid Office cannot accept preparer's copies of the required tax documents. You may obtain an IRS Tax Return Transcript online at www.irs.gov/Individuals/Get-Transcript or by phone at 1-800-908-9946. Make sure you request an IRS Tax Return Transcript and NOT an IRS Tax Account Transcript. Important Note: If you used the IRS Data Retrieval tool to transfer your IRS income data into your FAFSA, you may not have to submit the IRS Tax Return Transcript.
- 2. Complete pages 1-3 (Sections A-F) of this worksheet you and one of your parents must sign the certification (SECTION F) on page 3 of the worksheet. Collect the documents required for Section G on page 4 but do not complete that page in advance.
- 3. Submit the completed worksheet, tax return transcript(s), and any other required documents to the Financial Aid Office at your college. You will complete Section G in person at that time.

A. Student's Information

Student's Last Name	First Name	M.I	Student's Social Security Number	
Student's Street Address (i	nclude apt. no.)		Student's CUNYfirst ID	
(
City State Zip Code		Student's Date of Birth		
Student's Home Phone Nun	nber (include area co	de)	Student's Email Address	

B. Parents' Household Information

List the people your parents will support between July 1, 2015 and June 30, 2016. Include:

- Yourself and your parent(s)
- Your parent(s)' other children if (a) your parent(s) provide more than half of their support, or (b) if the
 other children would be required to provide parental information if they are completing a FAFSA for 2015–
 2016. 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 parent(s) now provide more than half of their support and will continue to provide more than half of their support through June 30, 2015.

Write the name of the college below for any household member, excluding your parent(s), who will be enrolled, at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2015, and June 30, 2016.

If more space is needed, attach a separate page with student's name and the last 4 digits of student's SSN at the top.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
Example: Jane Smith	18	Sister	State University	Yes
		Self		

Student Name:		Student SSN: XXX-XX-			
C. Student's Income Information to NOTE: If you filed (or will file) an amend college before completing this see	nded 2014 IRS to	ax return, you must conta	act the Financial Aid Office at you		
Check the box that applies:					
FAFSA. [The income tax information	I used the IRS Data Retrieval Tool in FAFSA-on-the-Web to transfer 2014 IRS income tax information into m FAFSA. [The income tax information from your FAFSA will be used to complete the verification process.]				
I have attached a copy of my 2014 :	I did not (or could not) transfer my 2014 income information to the FAFSA using the IRS Data Retrieval Tool I have attached a copy of my 2014 IRS Tax Return Transcript(s) to this worksheet.				
I have not filed (and am not required from work in 2014.	-				
I have not filed (and am not required work in 2014 as listed below. [List en an IRS Form W-2. Attach copies of a	every employer a	and the amounts earned i	n 2014, even if they did not issue		
If more space is needed, attach a separa Employer's Name	2014 Amoun		igits of student's SSN at the top. 2014 IRS Form W2 Attached?		
Example: ABC Company	\$1367.75		Yes		
31, 2014 or if your parent(s) file Check the appropriate box (or boxes I/we used the IRS Data Retrieval Too	formation for ea fal Aid Office if y led (or will file) o s): ool in FAFSA-on-	ach parent/stepparent lister your parents had a change an <u>amended</u> 2014 IRS tax othe-Web to transfer 2014	e in marital status after December x return. • IRS income tax information into		
the FAFSA. [The income tax information]	ation from the F	FAFSA will be used to com	plete the verification process.]		
I/we did not (or could not) transfer my/our 2014 income information to the FAFSA using the IRS Data Retrieval Tool. I/we have attached a copy of my/our 2014 IRS Tax Return Transcript(s) to this worksheet. [Note: if your parents filed a joint tax return, but you reported your parent's marital status on the FAFSA as separated, divorced or widowed, you must include copies of all IRS Form W-2s with the tax transcript.]					
I/we have not filed (and are not required to file) a 2014 federal income tax return and I/we had no income earned from work in 2014.					
I/we have not filed (and are not required to file) a 2014 federal income tax return but I/we had income earned from work in 2014 as listed below. [List every employer and the amounts earned in 2014, even if they did no issue an IRS Form W-2. Attach copies of all 2014 IRS Forms W-2 that were issued to you by employers].					
If more space is needed, attach a separate Employer's Name	e page with stude. 2014 Amoun		ts of student's SSN at the top. 2014 IRS Form W2		
Employer 3 Hume		Larried	Attached?		
Example: ABC Company	\$1367.75		Yes		
					

Stu	Student Name:		Student SSN: XXX-XX			
E.	Other Information to	Be Verified				
1.	Complete this item if one of the persons listed in Section B received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2013 or 2014 calendar years.					
	One of the persons listed in Section B of this worksheet received SNAP benefits in 2013 or 2014. If asked by my college, I will provide documentation of the receipt of SNAP benefits during 2013 and/or 2014.					
2.	Complete this item if one	of your parents PAID child sup	port in 2014.			
	of child support. [Do household size or liste If more space is needed, at	d. If asked by my college, I/we not include child support paid t ed in Section B of this workshee tach a separate page with student's	for children listed on your FAFS et.] name and the last 4 digits of stud	SA as part of your ent's SSN at the top.		
Name of Person who		Name of Person to whom	Name and Age of Child	Amount of Child		
	Paid Child Support	Child Support was Paid	for whom Support was Paid	Support Paid in 2014		
Fx	rample: Mary Smith	John Smith	Joseph Smith	\$5000		
LX	ampie: Hary Simer	John Simen	Joseph Simen	75000		
		I.				

We certify that all of the information reported on this worksheet is complete and correct. We further understand that if we purposely give false or misleading information, we could be fined, jailed, or both.

Student Signature	Date
Parent Signature	Date

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the Financial Aid Office at your college.

You should make a copy of this worksheet and all submitted documents for your records.

You must complete Section G on page 4 of this worksheet IN PERSON at the Financial Aid Office at your college.

Student Name:	Student SS	N: XXX-XX
G. Identity Verification and Statement of Educatio	nal Purpose	
Do not complete this page in advance. You mus Aid Office at your college.	t complete and sign	this page IN PERSON at the Financial
You have been selected by the U.S. Department of E appear in person at the Financial Aid Office at your c identification to a financial aid representative. The r which will be maintained in your student file.	ollege and present a p	piece of valid government-issued
Statement of Educational Purpose		
I certify that I,(Print Name)		
am the individual signing this Statement of Education may receive will only be used for educational purpos		
		for 2015-2016.
(Name of CUNY Institution Attending)		
Student's Signature:	Date:	
OFFICE USE ON	ILY- DO NOT WRITE	BELOW
1. Proof of Identity		
The above-named student has presented valid gover non-driver's license, military identification or passpo		
FA Certifying Officer's Signature	Date Received	Type of Valid ID Collected
2. Completion of High School or the Equivalent	<u> </u>	
The above-named student has submitted a final high appropriate CUNY office that shows evidence of grad state-issued general education equivalency (GED), o	uation from an accred	ited high school or educational institution,
FA Certifying Officer's Signature		Date Received