

2016–2017 Household Resources Verification Worksheet V6-Dependent Student

Your 2016–2017 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 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 2015 IRS Tax Return Transcript and W-2 Forms 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 all sections of this worksheet you and one of your parents must sign the certification (Section G) on page 5 of the worksheet.
- 3. Submit the completed worksheet, tax return transcript(s), and any other required documents to the Financial Aid Office at your college.

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 Phone Number (i	ncludo aroa codo)		Student's Email Address	
Student's Phone Number (1	ilciude area code)		Student's Lindii Address	

B. Parents' Household Information

List the people your parents will support between July 1, 2016 and June 30, 2017. 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 2016–2017. 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, 2017.

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, 2016, and June 30, 2017.

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 2015 IRS ta	ax return, you must conta	nct the Financial Aid Office at you	
Check the box that applies:				
I used the IRS Data Retrieval Tool in FAFSA. [The income tax information				
I did not (or could not) transfer my 2 I have attached a copy of my 2015	IRS Tax Retur	rn Transcript to this work	ksheet.	
I have not filed (and am not required from work in 2015.	•			
I have not filed (and am not required work in 2015 as listed below. [List et an IRS Form W-2. Attach copies of a	every employer a	and the amounts earned in	n 2015, even if they did not issue	
If more space is needed, attach a separa				
Employer's Name	2015 Amoun	t Earned	2015 IRS Form W2 Attached?	
Example: ABC Company	\$1367.75		Yes	
	_			
31, 2015 or if your parent(s) file	formation for ea al Aid Office if yo led (or will file) a	ach parent/stepparent liste our parents had a change	in marital status after December	
Check the appropriate box (or boxes	-			
I/we used the IRS Data Retrieval Too 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 2015 income information to the FAFSA using the IRS Data Retrieval Tool. I/we have attached a copy of my/our 2015 IRS Tax Return Transcript to this worksheet. [Note: if your parents filed a joint tax return, but you reported your parents' 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 2015 federal income tax return and I/we had no income earned from work in 2015.				
I/we have not filed (and are not requirement from work in 2015 as listed below. [a issue an IRS Form W-2. Attach copies	List every emplo ies of all 2015 Il	oyer and the amounts ear RS Forms W-2 that were i	rned in 2015, even if they did not issued to you by employers.]	
If more space is needed, attach a separa				
Employer's Name	2015 Amoun	it Earned	2015 IRS Form W2 Attached?	
Example: ABC Company	\$1367.75		Yes	

	etermine the correct annual amount month in 2015, multiply that amount ay or receive the same amount each	int by the number o	f months in 20)15 you paid or received it. If you	
no	re space is needed for any item, pro	ovide a separate pa	ge with the stu	dent's name and ID number at th	
pl a	ayments made by student and/or ans List any payments (direct or with ans (e.g., 401(k) or 403(b) plans), in the arthrough 12d with codes D, E, F, G	thheld from earning ncluding, but not lir	s) to tax-defer	red pension and retirement savin	
	Name of Person Who Made th	ne Payment	Total	Amount Paid in 2015	
Li B	nild support received ist the actual amount of any child su of this worksheet. Do not include ourt-ordered but not actually paid.				
Name of Adult Who Received the Support		Name and Age of Child For Whom Support Was Received		Amount of Child Support Received in 2015	
In	ousing, food, and other living alloclude cash payments and/or the cas	h value of benefits	received by stu	udent or student's parents. Do n	
ın	clude the value of on-base military Name of Recipient	Type of Benefi		Amount of Benefit Received in 2015	
Щ	eterans non-education benefits ist the total amount of veterans non arent(s). Include Disability, Death P ducational Work-Study allowances.	ension, Dependence Do not include Fe	y and Indemnited and Indemnited and Indemnited and Indexemple and	ty Compensation (DIC), and/or Vast Educational benefits such as:	
Li p E	lontgomery GI Bill, Dependents Edu				

Student SSN: XXX-XX-

Student Name:

E. Student's/Parent(s)' Untaxed Income to Be Verified

ent Name:	Student SSN:)	Student SSN: XXX-XX		
Other untaxed income List the amount of other untaxed inco reported elsewhere on this form. Incl Lung Benefits, untaxed portions of He Benefits, etc. Do not include Studer Assistance to Needy Families (TANF), Workforce Investment Act (WIA) Educ arrangements (e.g., cafeteria plans), Fuels.	lude untaxed income such as Worke ealth Savings accounts from IRS For nt Aid, Earned Income Credit, Addit untaxed Social Security Benefits, S cational Benefits, Combat Pay, bene	ers' Compensation, Disability, Blac m 1040 Line 25, Railroad Retirem ional Child Tax Credit, Temporary upplemental Security Income (SSI fits from Flexible Spending		
Name of Recipient	Type of Other Untaxed Income	Amount Received in 2015		
List any cash support received or paid elsewhere on this form. If someone is etc., include the amount of that perso WHOSE INFORMATION WAS ALRE student's behalf also include any distrestudent or the student's parents, such	s paying rent, utility bills, etc., for the paying rent parts on the solutions. DO NOT INCLUI (ADY REPORTED ON THE 2016-1) (ibutions to the student from a 529)	ne student or gives cash, gift cards DE SUPPORT FROM A PARENT 7 FAFSA. Amounts paid on the plan owned by someone other tha		
Source of Support				
Source of Support	Books			
Source of Support				
Source of Support				
Additional information: So that we can fully understand the faresources, benefits, and other amounthis may include items that were not financial aid office, and include such t TANF, etc.	amily financial situation, please proving the student and any required to be reported on the FAFS hings as Federal Veterans Education	members of the student's househo SA or other forms submitted to the n Benefits, Military Housing, SNAP,		
Additional information: So that we can fully understand the faresources, benefits, and other amount This may include items that were not financial aid office, and include such t	amily financial situation, please provise received by the student and any required to be reported on the FAFS	members of the student's househo SA or other forms submitted to the		
Additional information: So that we can fully understand the faresources, benefits, and other amounthis may include items that were not financial aid office, and include such t TANF, etc.	Books amily financial situation, please provides received by the student and any required to be reported on the FAFS hings as Federal Veterans Education Type of	members of the student's househo SA or other forms submitted to the n Benefits, Military Housing, SNAP,		
Additional information: So that we can fully understand the faresources, benefits, and other amounthis may include items that were not financial aid office, and include such t TANF, etc.	Books amily financial situation, please provides received by the student and any required to be reported on the FAFS hings as Federal Veterans Education Type of	members of the student's househo SA or other forms submitted to the n Benefits, Military Housing, SNAP,		
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Additional information: So that we can fully understand the faresources, benefits, and other amounthis may include items that were not financial aid office, and include such t TANF, etc.	Books amily financial situation, please provides received by the student and any required to be reported on the FAFS hings as Federal Veterans Education Type of Financial Support	members of the student's househous or other forms submitted to the Benefits, Military Housing, SNAP, Amount Received in 2015		

Student Name:		Student SSN: XXX-XX		
F. Other Information to B	Be Verified			
		on B received benefits from the S ood stamps) any time during the		
One of the persons lismy college, I will prov	ted in Section B of this work vide documentation of the rec	sheet received SNAP benefits in 2 ceipt of SNAP benefits during 201	2014 or 2015. If asked by 4 and/or 2015.	
2. Complete this item if one	of your parents PAID child s	support in 2015.		
child support was paid of child support. [Do household size or liste	d. If asked by my college, I/ not include child support pai ed in Section B of this worksh	low the requested information for we will provide additional docume of for children listed on your FAFS neet.]	entation of the payment A as part of your	
Name of Person who Paid Child Support	Name of Person to whor Child Support was Paid	n Name and Age of Child	Amount of Child Support Paid in 2015	
Example: Mary Smith	John Smith	Joseph Smith	\$5000	
G. Certification and Signa				
	ormation reported on this wo nisleading information, we co	orksheet is complete and correct. buld be fined, jailed, or both.	We understand that if	
Student Signature		Date		
Parent Signature		Date		
	1			

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.