

Susquehanna University
2016-2017 VERIFICATION FORM - DEPENDENT STUDENT

Student Name _____ Student SSN _____
Last First MI

Student Date of Birth _____

Student Telephone Number () _____ Student E-Mail _____

Parent Telephone Number () _____ Parent E-Mail _____

Complete and sign this verification form and return it to Student Financial Services as soon as possible so that your financial aid won't be delayed. If you have any questions, please contact Student Financial Services staff at (570) 372-4450.

The federal Department of Education has selected your FAFSA for review in a process called "Verification." SU is required to collect information in this format to confirm that you have entered correct information on your FAFSA. Your financial aid application cannot be processed until all requested information is received. Failure to complete the verification process by the last enrolled day of the award period will result in a loss of aid. This review must be conducted under the financial aid program rules (34 CFR, Part 668).

Successful completion of the Verification process requires that families provide income tax information for both the student AND the student's parent(s) in one of two ways:

1) Obtain a paper copy of the 2015 IRS Income Tax Transcript:

- Call the IRS at 1-800/908-9946, or go to <http://www.irs.gov/Individuals/Get-Transcript>, to order. Provide to the Financial Aid Office by mail or fax.

*****OR*****

2) Submit (or re-submit) the 2016-2017 FAFSA (www.fafsa.gov) and select the IRS data retrieval option. This is available for most tax filers 2 weeks after filing taxes on-line or 6 weeks after filing by US Mail.

Please note that the Verification process will not be complete until all required Tax Transcripts are received or the FAFSA is (re)submitted using the data retrieval function on the FAFSA website (www.fafsa.gov).

FAMILY INFORMATION

List the people in your parent's household. Include the following:

- your parents (including stepparent) and yourself, even if you don't live with your parents, **and**
- your parents' other children, even if they don't live with your parents, if: (a) your parents will provide more than half of their support from July 1, 2016 through June 30, 2017, **AND** (b) the children are under age 24 and neither married nor veteran of the armed services **and**
- other people if they now live with your parents **AND** your parents provide more than half of their support **AND** will continue to provide more than half of their support from July 1, 2016 through June 30, 2017.

Also write in the name of the college for any household member who will be attending college at least half-time between July 1, 2016 and June 30, 2017, **AND** will be enrolled in a degree, diploma, or certificate program. Attach an additional sheet if necessary.

Full Name	Age	Relationship	College
		Self (Student)	Susquehanna University

STUDENT NAME: _____

TAX TRANSCRIPT AND INCOME INFORMATION

Student: check **one box** below. Are you or will you be required to file a 2015 Federal Income Tax Return?

- YES.** Attach a copy of a Federal Tax Return Transcript from the IRS or update your FAFSA with IRS information by use of the IRS data retrieval function on the FAFSA website.
- NO.** Complete the table below and attach all W-2's.

Employer name	2015 Wages

Parent(s): check **one box** below. Are you or will you be required to file a 2015 Federal Income Tax Return?

- YES.** Attach a copy of a Federal Tax Return Transcript from the IRS or update the student's FAFSA with IRS information by use of the IRS data retrieval function on the FAFSA website.
- NO.** Complete the table below and attach all W-2's. Check here if you will not file and are not required to file a 2015 U.S.

Employer name	2015 Wages

SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM BENEFITS

Did any member of your parent's household receive SNAP benefits (food stamps) during the calendar year 2015?

- YES.** Attach official documentation indicating receipt of SNAP benefits.
- NO.**

Complete the following table derived from the FAFSA (student questions 44 and 45; parent questions 92 and 93). DO NOT LEAVE ANY ITEM BLANK. Enter zero if you have no response to the item.

Student	2015 Additional Financial Information	Parent
\$	Education credits from IRS Form 1040-line 50 or 1040A-line 33.	\$
	Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	
	Student grant and scholarship aid reported to the IRS in your adjusted gross income. Includes AmeriCorps benefits (awards, living allowances, and interest accrual payments), as well as grant or scholarship portions of fellowships and assistantships.	
	Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Do not enter untaxed combat pay reported on the W-2 (Box 12, Code Q).	
	Earnings from work under a cooperative education program offered by a college.	
\$	Total Student	Total Parent \$

STUDENT NAME: _____

Student	2015 Untaxed Income	Parent
\$	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S.	\$
	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040—total of lines 28 + 32 or 1040A—line 17.	
	Child support received for all children. Do not include foster care or adoption payments received.	
	Tax exempt interest income from IRS Form 1040—line 8b or 1040A—line 8b.	
	Untaxed portions of IRA distributions from IRS Form 1040—lines (15a minus 15b) or 1040A-lines (11a minus 11b). Exclude rollovers. If negative, enter a zero.	
	Untaxed portions of pensions from IRS Form 1040—lines (16a minus 16b) or 1040A-lines (12a minus 12b). Exclude rollovers. If negative, enter zero.	
	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).	
	Veterans' non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	
	Other untaxed income not reported, such as worker's compensation, disability, etc. Do not include student aid, earned income credit, child tax credit, welfare payments, untaxed Social Security benefits, Workforce Investment Act educational benefits, combat pay (if you are not a tax filer), benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	
	Money received, or paid on your behalf (e.g. bills) not reported elsewhere on this form.	
\$	Total Student	Total Parent \$

SIGN THIS WORKSHEET

We certify that all the information reported on this worksheet is complete and correct.

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

Student Signature

Date

Parent Signature

Date

**Please return to: Student Financial Services
Susquehanna University
514 University Ave.
Selinsgrove, PA 17870**

FAX: 570/372-2722