



# 2016-17 Verification Worksheet

## Section 1. Student Information

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ BW Student ID # or  
 SSN (do not leave blank): \_\_\_\_\_  
 Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

When verification of your FAFSA is complete, you will be notified in one of the following ways: 1) you will receive your first award letter; 2) you will receive a revised award letter; or 3) you will receive other communication from our staff.

## Section 2. Household Information

1) Select your status. You are considered a dependent student if you were required to provide parental information on your FAFSA.

- Dependent students:** List the people in your parents' household, excluding foster children. Include:  
 (1) yourself, regardless of where you live,  
 (2) the parent(s) with whom you live,  
 (3) your parents' other children and other people, if (a) your parents will provide more than half of their support between 7/1/16 - 6/30/17, or (b) the children could be considered a dependent on their own FAFSA.
- Independent students:** List the people in your household, excluding foster children. Include:  
 (1) yourself,  
 (2) your spouse, if you are married,  
 (3) your children and other people, if you will provide more than half of their support from 7/1/16 through 6/30/17.

2) Write your name and age on the first line below. **THEN** list the names, ages, and relationships to you for everyone else in your household (per the guidelines above). If anyone *but your parents* will be enrolled at least half-time in a degree or certificate program between July 1, 2016 and June 30, 2017, include the name of the school they will be attending. If more space is needed, continue this table on a separate page with the student's name and SSN at the top.

Full name	Age	Relationship to Student in Section 1	College/University in 2016-17
		Self (student from Section 1)	Baldwin Wallace University
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Section 3. Tax Forms and Income Information (Check boxes that apply.)

**Do not leave this section blank!**

**TAX FILER:** Filed a 2015 Federal Tax Return (see below)      **NON-TAX FILER:** Earned income in 2015 but did not file/was not required to file a 2015 Federal Tax Return (see below)      **NON-TAX FILER:** Did not earn income in 2015 and did not file a 2015 Federal Tax Return (see below)

You (student)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your spouse (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your Parent #1 (dependent students only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your Parent #2 (dependent students only)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**TAX FILERS:** Some tax filers will be required to submit a copy of their 2015 tax return transcript from the IRS. Refer to the Missing Information Email/Letter the student received from our office to determine if tax return transcripts must be submitted with this Verification Worksheet. This information can also be obtained by most students on WebExpress under the "Financial Aid Missing Documents" section. (Returning students - look under "Financial Information." New, admitted students who have received a BW email address and WebExpress log in - look under "New Student Resources.") **You may order a copy of your IRS Tax Return Transcript online - [www.irs.gov/transcript](http://www.irs.gov/transcript) (tax account transcripts cannot be accepted).**

**NON-TAX FILERS:** Each non-tax filer noted above who earned income in 2015 **must submit all W-2 forms received for 2015.** If you did not keep copies of your W-2 forms from 2015, contact your place of employment for copies.

## Section 4. Certification.

By signing this worksheet, I (we) certify that all information reported is complete and correct. **Warning:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent signature (dependent students only): \_\_\_\_\_ Date: \_\_\_\_\_