

## 2017-18 Dependent Student Verification Worksheet (V1)

Your 2017-18 Free Application for Federal Student Aid (FAFSA) was selected for federal verification. By federal law, we are required to verify certain information you have reported on the FAFSA and collect required documents. Corrections to your FAFSA may be made once verification items are submitted and reviewed.

This form must be returned to the Office of Financial Aid within three weeks of receiving this notice. Financial aid will not be calculated and/or disbursed to your account until verification is completed. **Incomplete forms will be returned to you for completion**. The following definition and guidelines should be used as reference while completing this document:

- The term "legal parent(s)" is defined as the student's biological and/or adoptive parent(s). Foster parents, grandparents and legal guardians are not defined as parents.
- If parents are separated, divorced, widowed or remarried, provide information for the legal parent (and stepparent) with whom the student lived for the greater portion of the last 12 months. If the student did not live with one parent more than the other, give answers about the parent who provided more financial support during the past 12 months.
- If legal parents (biological and/or adoptive) are not married to each other and live together, provide information about both of them regardless of their gender.

PART A – STUDENT INFORMATION		
1. Name:		
2. Permanent mailing address:		
3. Home phone number:	Student cell number:	
4. Social Security Number:	Parent cell number:	
5. I am a (check only one):	Continuing Augustana student (previously enrolled)	☐ First-time Augustana student
6. Augustana ID number (if known):		

## PART B - VERIFICATION OF HOUSEHOLD SIZE/NUMBER IN COLLEGE List below the people in your parent(s)' household.

## Please read the directions below. Each field in the chart must be completed. Include:

- 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, 2017, through June 30, 2018, OR if the other children would be required to provide parental information if they were completing a FAFSA for 2017-18. 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) provide more than half of their support AND will continue to provide more than half of their support from July 1, 2017 through June 30, 2018.

Include the name of the college for any household member, excluding your parent(s), who will be enrolled at least half time in a degree, diploma or certificate program at a postsecondary educational institution between July 1, 2017 and June 30, 2018.

Based on the criteria above, list names (including parents) of household members.			Relationship to student P= Parent/Stepparent S= Sibling If other, please specify relationship	Will attend college at least half-time in 2017-18 in a degree or certificate program (excluding parents)		Name of college this person will attend in 2017-18
First Name	Last Name	Age		Yes	No	
1			self /applicant			Augustana College
2						
3						
4						
5						
6						
7						
8						

If you filed an amended return, filed for a tax extension, or have been a victim of taxpayer identity theft, please call the Office of Financial Aid at 309-794-7207.

PART C - STUDE	ENT APPLI	CANT A	All studen	ts must complete	e Part C. Pa	rents should go t	o Part D	). Check only the b	ox that applies:	
	I filed/will file a 2015 tax return. If checked, go to Part E.									
	I did not/will not file and am not required to file a 2015 tax return and had no income.* If checked, go to Part E.									
		I did not/will not file and am not required to file a 2015 tax return and had income.* List below all sources and amounts of income received in 2015. You must submit all 2015 W-2 forms if you did not/will not file a 2015 tax return.								
		2015 Stu	Student Income (non-tax filers only)			W-2 received for this income source?				
		Source/	Amount _			_\$	Yes 🖵	No 🗖		
		Source/	Amount _			_\$	Yes 🖵	No 🗖		
PART D - PAREN	NT(S) All p	oarents r	nust com	plete Part D. Che	ck only the	box that applies:				
	I/We filed	d/will file	a 2015 ta	ax return. <b>If check</b>	ed, go to P	art E.				
	I/We did	not/will	not file ar	nd are not require	d to file a 2	015 tax return an	d had no	income.* <b>If chec</b>	ked, go to Part E.	
	I/We did not/will not file and are not required to file a 2015 tax return and had income.* List below all sources and amounts of incomed received in 2015. You must submit all 2015 W-2 forms if you did not/will not file a 2015 tax return.									
		2015 Pa	rent Inco	t Income (non-tax filers only)			W-2 re	V-2 received for this income source?		
		Source/	Amount _			_\$	Yes 🗖	No 🗖		
		Source/	Amount _			_\$	Yes 🗖	No 🗖		
PART E - OTHER	R INFORMA	ATION TO	BE VER	IFIED Please res	pond to eac	h question. <b>Ente</b>	r a zero	(0) if the question	n does not apply.	
2015 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 forms in boxes 12a through 12d, codes D, E, F, G, H and S. <u>Do not</u> include amounts from Code C or Code DD. <u>Do not</u> include mandatory contributions. <b>Reference your 2015 W-2 form(s) when completing this question</b> .										
2015 child suppo	rt <b>receive</b>	I for all o	•	reported in housel	-			T		
foster care or ad	loption pay	ments.						\$	\$	
2015 housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Do not include the value of on-base military housing or the value of a basic military allowance for housing.  \$ \$						_ \$				
DARTE BOLLO	WEDG D					0.01				
PART F - ROLLO	DVERS Do	es your 2	2015 fede	ral tax return incl	ude a rollov	er? Check the ap	oplicable	e box(es) below.		
Rollover included in the following tax lines?:							Amount of rollo	over from:		
1040, lir	ne 15a	Yes 🖵	No 🗖					1040, line 15a \$		
1040, lir	ne 16a	Yes 🖵	No 🗖	If "Yes" attach 1099-R for each rollover.				1040, line 16a \$		
1040A,	line 11a	Yes 🖵	No 🗖					1040A, line 11a \$		
1040A, I	line 12a	Yes 🗖	No 🗖 🍃	1040A, line 12a \$						
PART G - CERTII										
By signing below, I/we certify that all information reported is true and correct to the best of my/our knowledge. If asked, I/we agree to provide proof that the information is correct. I/We allow the financial information provided to be discussed with all parties who provided data to complete the application. I/We realize that until all requested information has been submitted, reviewed and verified, no estimated financial aid will be credited to the student account. I/We authorize Augustana College to release updated or corrected information, based on verification, to the Federal Aid Processing Center.										
Signature - Father/Mother/Stepparent Date			Date		Student's Signature	е		Date		
Signature – Father	/Mother/Ste	pparent		Date						