



## 2015-2016 Verification Work-Sheet (V1)

Your application was selected by the U.S. Department of Education for review in a process called "Verification". The Office of Financial Aid must compare your FAFSA with the information you provide on this worksheet and other financial documents. If there are differences between your application information and the documents you submit, your application may need to be corrected. **The Office of Financial Aid cannot make any federal financial aid payments available to you or process a student loan request until all verification requirements have been met and the necessary corrections have been made.**

### Next Steps

1. Complete the IRS Data retrieval through FAFSA on the Web. (Visit our website [www.mountsaintvincent.edu/verification](http://www.mountsaintvincent.edu/verification) for more information). If you cannot use the IRS Data Retrieval Tool, you may order a **TAX RETURN TRANSCRIPT** from the Internal Revenue Service online at [www.irs.gov/transcript](http://www.irs.gov/transcript) or by phone at 1-800-908-9946. Obtain a **2014 Federal IRS Tax Return Transcript and W-2 forms** for yourself, your spouse (if married) or your parents/step-parent (if dependent).
2. Complete all sections and sign this worksheet.
3. Return the completed worksheet and all requested documents to the Office of Financial Aid: Fax: 718-405-3490  
 PDF, Email: [financial.aid@mountsaintvincent.edu](mailto:financial.aid@mountsaintvincent.edu)  
 Mail: College of Mount Saint Vincent, Office of Financial Aid, 6301 Riverdale Ave, Riverdale NY 10471

### A. Student Information (Please Print)

_____		_____	_____	_____
Last name	First name	M.I.	Social Security Number or CMSV ID #	
_____			_____	
Address (include apt. #)			Date of Birth (mm/dd/yyyy)	
_____		_____	_____	
City	State	Zip Code	Phone # (include area code)	

### B. Family Information (Please Print)

- Check the appropriate boxes below and provide the requested information and documents:**
- Independent Students:** List the people that you (and your spouse) will support between July 1, 2014 and June 30, 2015. Include yourself, your spouse, and your dependent children. Include other people only if they now live with you and you provide more than half their support and will continue to provide more than half their support from July 1, 2014 – June 30, 2015.
- Dependent Students:** List all the people in your household between July 1, 2014 and June 30, 2015. Include yourself, your parents, and your parents' other children if (a) your parents provide more than half of their support or (b) the children would be required to provide parental information when applying for Federal Student Aid. Include other people only if they now live with your parents and receive, and will continue to receive, more than half their support from them between July 1, 2014 and June 30, 2015.

**TURN PAGE:** Write the names of **all** family members including **your-self**. Also write the name of the college for any family member who will be attending college at least half-time between July 1, 2014 and June 30, 2015 and will be enrolled in a degree or certificate program. If you need more space, attach a separate page. (Parents of dependent students are not included).



Attach Additional Sheets if necessary. Last Name, First Name, Middle Initial	Age	Relationship	College
		Self	College of Mount Saint Vincent

During 2014 was child support paid by any member of the household listed above? \_\_\_ No \_\_\_ Yes\*

If yes:

Name of household member who paid support: \_\_\_\_\_ Amount of Child support paid in 2014: \$ \_\_\_\_\_

Name of person to whom child support was paid in 2014: \_\_\_\_\_

Name of Child(ren) for whom child support was paid in 2014: \*\* \_\_\_\_\_

Signature of member who paid child support: \_\_\_\_\_

\*\*Child(ren) listed should not be included in the FAFSA for number in the household.

### C. Tax Forms & Income Information (Please Print)

All tax filers must submit a copy of their 2014 federal tax return transcript from the IRS and copy of all W-2s.

1. Please check here if you and/or your parent(s) **successfully used the IRS Data Retrieval Tool Process.**

2. Check the box below for each person who is **NOT** required to file a 2014 federal income tax return.

If employed list employer and amount earned. All W2's must be submitted.

Self

Spouse

Parent 1(father (step))

Parent 2(mother (step))

Name of Employer	Student Amount	Parent Amount

3. Did anyone in the household receive SNAP benefits during 2014-2015?  Yes  No

### D. Certification

By signing this worksheet, I [we] certify that all the information reported on this worksheet is complete and correct. If dependent, at least one parent must sign. **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 (dependent student) or Spouse Signature

Date

#### Office Use Only

Verification completed by: \_\_\_\_\_ Date: \_\_\_\_\_ EFC: \_\_\_\_\_

Authorized Signature

IRS Data Retrieval confirmed on Transaction # \_\_\_\_\_ ISIR processed date: \_\_\_\_\_