

# 2016 - 2017 Verification Worksheet

**STUDENT INFORMATION**

Last Name	First Name	M.I.	Social Security Number
Address (include apt. no.)			Date of Birth
City	State	Zip Code	Phone Number (include area code)

**FAMILY INFORMATION - Follow these instructions *carefully***

List *only* the following people in your household:  
 \* yourself  
 \* your spouse (if you have one)  
 \* your children (if you will provide more than half of their support from July 1, 2016 through June 30, 2017.

\* other people if they now live with you, **and** you 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. You must submit proof that you are providing more than 50% of the support. Proof can include non-filer's statement or tax return transcript for dependent person.

Write the name of all household members in the space(s) below that meet the requirements listed above. Also, write the name of the college for any household member, who will be enrolled in a degree or certificate program and attending college at least half-time between July 1, 2016 and June 30, 2017. If more space is needed, attach a separate page and include all information requested.

Full Name	Age	Relationship	Name of College (only if attending half time or more)
		Self	Galveston College

**STUDENT'S MARITAL STATUS (check only one)**

- Single     
  Married/Remarried     
  Separated     
  Divorced     
  Widow/Widower

Month/Year Married: \_\_\_\_\_ Month/Year Separated: \_\_\_\_\_ Month/Year Divorced: \_\_\_\_\_ Month/Year Widowed: \_\_\_\_\_

*Students who filed joint returns and have since separated, divorced, married someone else, or been widowed must submit all copies of all W-2's from the joint return.*

**STUDENT'S TAX FORMS (check only one and provide *required* document)**

- I have already completed my 2015 tax return.
  - The student (and/or spouse) filed a 2015 tax return and used the IRS Data Retrieval Tool to complete the FAFSA.
  - Check and submit a signed copy of your 2015 tax transcripts and W-2s.
- I will file, but I have not yet completed my return. I understand that consideration for financial aid will not be processed until I provide the school a signed tax return transcript and W-2s. My **2015** tax return transcript will be submitted to the school by \_\_\_\_\_.
- I am not going to file a 2015 tax return but I did work during 2015. Check and submit all W-2s and/or 1099 Statements.
- I did not work during 2015. List all untaxed income on back page.

**SPOUSE'S TAX FORMS (complete only if student is married; check only one and provide the *required* document)**

- A joint return was filed with my spouse.
- My spouse filed a separate 2015 tax return. Check and submit a copy of your spouse's 2015 tax return transcript and W-2s that are signed by your spouse.
- My spouse will file a 2015 tax return. I understand that consideration for financial aid will not be processed until I provide the school a tax return transcript and W-2s that are signed by my spouse. Spouse's 2015 tax return transcript will be submitted to the school by \_\_\_\_\_.
- My spouse is not going to file a 2015 tax return but my spouse did work during 2015. Check and submit all W-2s and/or 1099 Statements.
- My spouse did not work during 2015. List all untaxed income on back page.

**Make sure that tax forms are signed.**

Student's Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

If the student and/or spouse were employed in 2015 list below the names of all employers, the amount earned from each employer in 2015, and provide copies of all 2015 IRS W-2s issued to the student and/or spouse by their employers. List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, provide a separate page with the student's name and ID number at the top.

Only complete this section if you and/or your spouse did not file taxes.

Employee's Name	Employer's Name	2015 Amount Earned

**Additional Financial Information - Report 2015 Annual Amounts**

Child Support you paid because of divorce or separation or as a result of legal requirement. **DO NOT INCLUDE** support for child(ren) in your household.

Name of Child	Date of Birth mm/dd/yy	Name of Person Whom the Support is Paid	Address Where the Child Lives	Amount Paid
<b>2015 TOTAL Child Support PAID</b>				

Please enter zeros if any of the following do not apply to you.

Student and Spouse	2015 Untaxed Income - Report 2015 Annual Amounts
	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reports on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H and S.
	Child Support you <b>received</b> for all children. Do not include foster care or adoption payments.
	Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and case value of benefits). <b>DO NOT INCLUDE</b> BAH (Basic Allowance for Housing) if a student/parent is in the military. However, the basic allowance for subsistence (BAS) still counts as untaxed income.
	Veteran's non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.
	Any other untaxed income or benefits not reported elsewhere in items 44a through 44h. <b>DO NOT INCLUDE</b> student aid, EIC, additional child tax credit, welfare payments, untaxed Social Security benefits, SSI, Workforce Investment Act Educational benefits, on-base military housing or military housing allowance, combat pay (if you are not a tax filer), benefits from flexible spending arrangements (cafeteria plans), foreign income exclusion or credit for federal tax on special fuels. <b>DO INCLUDE</b> Disability Worker's Compensation, interest income on educational IRA's untaxed portion of railroad retirement benefits, black lung refugee assistance, the untaxed portion of capital gains, and foreign income that was not taxed by any government. Also include the first time homebuyer tax credit from IRS Form 1040 Line 67.
	Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form.
	<b>Total</b>

**SIGN THIS WORKSHEET** By signing this worksheet, I (we) certify that all the information reported on is complete and correct.

Student's signature required: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's signature (optional): \_\_\_\_\_ Date: \_\_\_\_\_

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

**Submit this worksheet to the Financial Aid Office.**

Note: All documents and forms submitted become the property of Galveston College and cannot be returned.  
Please make copies for your records before submitting the required information to the Financial Aid Office.