



Division of Student Affairs  
Office of Financial Aid

Telephone: (850) 599-3730  
Fax: (850) 561-2730  
Email: [financialaiddocs@famu.edu](mailto:financialaiddocs@famu.edu)

## 2020-2021 Verification Worksheet (Independent)

Your 2020-2021 Free Application of for Federal Student Aid (FAFSA) was selected for a process called Verification. Before your financial aid could be awarded, we must verify the information you and/or your Spouse reported on your FAFSA. Therefore, complete ALL sections of this worksheet, sign and submit it to the Office of Financial Aid.

\_\_\_\_\_  
First Name                      Last Name                      M.I.

\_\_\_\_\_  
FAMU Student ID Number

\_\_\_\_\_  
Permanent/Home Street Address (Include apt. no.)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
City                      State                      Zip Code

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Permanent/Home Contact Number

\_\_\_\_\_  
Student's Contact Number

-----  
**A. Household Information**

List below the people in your household. Include:

- Yourself
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half their financial support between July 1, 2020 and June 30, 2021, or if the other children would be required to provide your information if they were completing a FAFSA for 2020-2021. Include children who meet either of these standards even if they do not live with you.
- Other people if they now live with your parents, and your parents provide more than half of their financial support and will continue to provide more than half of their support from July 1, 2020 through June 30, 2021.
- If applicable, provide the name of the college or university that each family member will be attending at least halftime between July 1, 2020 and June 30, 2021.

Full Name	Age	Relationship	College/University	Enrolled
		<i>Self</i>	<i>Florida A&amp;M University</i>	<i>Yes</i>

**B. Income Information/Filing Status (January 1, 2018 through December 31, 2018)**

To obtain an IRS Tax Return Transcript or Non-Filing Letter, go to [www.irs.gov](http://www.irs.gov) and click on the “Order a Return Transcript” or Call 1-800-908-9946.

**Student’s Income (check only one option and submit requested documents)**

- I (we) was not employed in 2018 and did not file a 2018 Tax Return. (Submit a Verification of Non-Filing Letter from the IRS and attach it to this document.)
- I was employed but was not required to file taxes in 2018 (Submit a W-2 for each employer)
- I used the IRS Data Retrieval Tool to transfer IRS income information into the FAFSA
- I corrected my 2018 Federal Income Tax Return using an Amended Tax Return (Must submit a signed copy of the 2018 IRS Form 1040X and 2018 IRS Tax Transcript)
- I am unable or will not use the IRS Data Retrieval Tool. Attach a copy of the student 2018 IRS Tax Return Transcript
- I corrected my 2018 Federal Income Tax Return using an Amended Tax Return (Form 1040X)

**C. Other Information to Be Verified**

Complete this section if you or your spouse, if married, **paid child support in 2018.**

Names of Person Who Paid Child Support	Name of Person to Whom Child Support was paid	Name of Child for Whom Support Was Paid	Amount of Child Support Paid in 2018
<i>John Smith (example)</i>	<i>Jane King (example)</i>	<i>Terry Smith (example)</i>	<i>\$6,000.00 (example)</i>

**D. Untaxed Income**

DO NOT include financial aid, social security benefits, or welfare benefits. **DO NOT LEAVE THIS AREA BLANK.** Be sure to enter N/A or ZERO for items that do not apply.

	Student	Spouse
Payments to tax-deferred pension, amounts reported on the W-2 forms in Boxes 12a -12d, codes D, E, F, G, H and S		
Child Support Received		
Housing, Food, Other living allowances for military/clergy		
Veteran’s Non-Educational benefits(disability, death pension, Dependency& Indemnity Comp and/or VA Work-Study allowance		
Other Untaxed Income Not Reported (Worker’s comp, disability, etc.)		

Student Name \_\_\_\_\_

FAMU Student ID \_\_\_\_\_

**E. Certification and Signatures**

I (we) understand that the information provided on this FAFSA Verification Worksheet is complete and accurate. I (we) understand that intentionally providing false, inaccurate or misleading information can result in federal penalties.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Date

Sign, date this worksheet and all required documents, and then submit the worksheet and documents to the Office of Financial Aid:

**Mailing Address:** Office of Financial Aid  
101 Foote-Hilyer Administration Center  
Tallahassee, Florida 32307

**Fax Number:** (850) 561-2730

**Email:** financialaiddocs@famuedu

-----  
**Office Use Only:**

\_\_\_\_\_ Mail                      \_\_\_\_\_ Email                      \_\_\_\_\_ Fax                      \_\_\_\_\_ In Person

Received by: \_\_\_\_\_ Date: \_\_\_\_\_