

Student's Last Name _____ First Name _____ M.I. _____ Student's Social Security Number _____

2018-19 Independent Verification Worksheet-V1

Your 2018-2019 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. To verify that you provided correct information, we will compare your FAFSA with the information on this verification form and any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete, sign, and submit this verification form and required documents to AMDA's Financial Aid Office. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

Student Tax Information:

1. Student Tax Filers: Check only one box below if the student and/or spouse **is required** to file a **2016** income tax return with the IRS.

The student and/or spouse completed the **IRS Data Retrieval Tool** in the FAFSA to transfer the **2016** IRS income tax return information.

TO USE THE IRS DATA RETRIEVAL TOOL:

- Log into www.fafsa.ed.gov to complete or correct your FAFSA
- Click on the Financial Information tab at the top of the page
- Click "LINK TO IRS" to transfer your income information to your FAFSA

-OR-

The student and/or spouse will provide a **2016 IRS Tax Return Transcript**.

TO OBTAIN A 2016 IRS TAX RETURN TRANSCRIPT:

- Log into www.irs.gov and click on the "Get My Tax Record" link or call 1-800-908-9946
- Make sure to request the **IRS Tax Return Transcript**

NOTE: Please allow approximately two weeks from the date you filed your tax return electronically to use the IRS Data Retrieval or request tax transcripts. If you filed a paper return, please allow 6-8 weeks for processing by the IRS.

2. Student Non-Tax Filers: Check only one box below if the student and/or spouse will not file and **is not required** to file a **2016** income tax return with the IRS.

A VERIFICATION OF NON-FILING LETTER FROM THE IRS IS REQUIRED FOR ALL NON-TAX FILING PARENTS AND INDEPENDENT STUDENTS.

TO OBTAIN A VERIFICATION OF NON-FILING:

- Log into www.irs.gov and click on the "Get My Tax Record" link or call 1-800-908-9946
- Make sure to request the **"Verification of Non-filing Letter"**

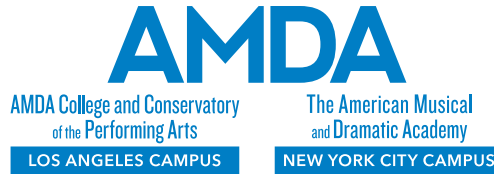
The student and/or spouse were not employed and had no income earned from work in **2016**.

-OR-

The student and/or spouse were employed in **2016** and have listed below the names of all employers, the amount earned from each employer in **2016**, and whether an IRS W-2 form was provided. List every employer even if the employer did not issue an IRS W-2 form.

| Employer's Name | Amount Earned in 2016 | IRS W-2 Provided? |
|--|-----------------------|-------------------|
| Suzy's Auto Body Shop (example) | \$2,000.00 | Yes |
| | | |
| | | |
| | | |
| Total Amount of Income Earned from Work | \$ | |

| | | |
|-------------------|--|---|
| Submit to: | Los Angeles Financial Aid Office 6305 Yucca St., Los Angeles, CA 90028 Fax: 323-469-4823 | New York Financial Aid Office 211 West 61st St., New York, NY 10023 Fax: 212-247-2784 |
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3. Household Information:

List the people in the **student's household** including:

- The student.
- The student's spouse.
- The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2018, through June 30, 2019.
- Other people that live with the student and will receive more than half of their support from the student through June 30, 2019.

Please include higher education institutions for any household member who will be enrolled **at least half time** in a degree, diploma, or certificate program between July 1, 2018, and June 30, 2019.

If more space is needed, provide a separate page with the student's name and Social Security Number at the top.

| Full Name | Age | Relationship to Student | College Institution | Will be Enrolled at Least Half Time (yes/no) |
|-----------|-----|-------------------------|---------------------|--|
| | | Self | AMDA | |
| | | | | |
| | | | | |
| | | | | |
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| | | | | |

Note: We may require additional documentation to confirm the information provided regarding the household members enrolled in eligible postsecondary educational institutions.

4. Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

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

Print Student's Name _____

Date of Birth _____

Student's Signature _____

Date _____

| | | |
|-------------------|--|---|
| Submit to: | Los Angeles Financial Aid Office 6305 Yucca St., Los Angeles, CA 90028 Fax: 323-469-4823 | New York Financial Aid Office 211 West 61st St., New York, NY 10023 Fax: 212-247-2784 |
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