

NEED TO KNOW (cont'd)

1997-98 Signature Requirements for Application and Verification Information

<i>...general requirements for federal student aid</i>	Application (FAFSA, Renewal Application, EDE, FAFSA Express)	IRS FORMS 1040 or other form submitted for verification	Verification Worksheet	
Student	Must sign statement that data are accurate (on application, echo document, or signature page)	Tax return must be signed by student (or spouse) or by the tax preparer (or stamp)	Must sign worksheet	
Parent(s) (of dependent student)	At least one parent must sign statement that data are accurate (on application, echo document, or signature page)	Tax return must be signed by at least one parent or by the tax preparer (or stamp)	At least one parent must sign	
FAA	Must certify if dependency override is performed			
<i>...additional requirements to receive a Federal Pell Grant</i>	SAR to be submitted for corrections	EDE corrections	Professional Judgment SAR or EDE	Valid SAR or ISIR
Student	Must sign corrections statement on Part 2 of SAR	School must have signed documentation		No signature required
Parent(s) (of dependent student)	At least one parent must sign corrections statement on Part 2 of SAR	School must have signed documentation		No signature required
FAA			Must certify for adjustments or dependency override	

Note:

- Statements of Educational Purpose and Overpayment/Default are on the FAFSA and are considered signed when student signs the FAFSA.
- Student's spouse is not required to sign any of the student's financial aid documents.

PRACTICE (cont'd)

1997-98 VERIFICATION WORKING PAPER

Student: _____ SS#: _____ Dependency Status: _____
 Type of return (parent/s): 1040 1040A 1040EZ Type of return (student/spouse): 1040 1040A 1040EZ

Item Reported (Check box if match or not applicable)	Amount Reported & SAR Line Item		Amount Verified & Source Line Item	
Household Size	<input checked="" type="checkbox"/>	6 46/51	6	Worksheet
Number in College	<input type="checkbox"/>	47/52		Worksheet
Parent Adjusted Gross Income	<input type="checkbox"/>	67	1040-31; 1040A-16; 1040EZ-4	
Parent Income Tax Paid	<input type="checkbox"/>	68	1040-46; 1040A-25; 1040EZ-10	
Student/Spouse Adjusted Gross Income	<input type="checkbox"/>	55	1040-31; 1040A-16; 1040EZ-4	
Student/Spouse Income Tax Paid	<input type="checkbox"/>	56	1040-46; 1040A-25; 1040EZ-10	
Student Earnings	<input type="checkbox"/>	57		Worksheet
Spouse Earnings	<input type="checkbox"/>	58		Line items for reference only.
Father Earnings	<input type="checkbox"/>	69		1040-7+12+18
Mother Earnings	<input type="checkbox"/>	70		1040A-7
				1040EZ-1
Untaxed Income:	<input type="checkbox"/>			
*Social Security Benefits	<input type="checkbox"/>	60/72		Worksheet or SSA statement
**Child Support	<input type="checkbox"/>	62/74		Worksheet
IRA / KEOGH Deductions	<input type="checkbox"/>	***63/75	1040-23a+23b+27; 1040A-15c	
Foreign Income Exclusion	<input type="checkbox"/>	***63/75	IRS 2555-43; 2555EZ-18	
Earned Income Credit	<input type="checkbox"/>	59/71	1040-57; 1040A-29c; 1040EZ-8	
Interest on Tax-Free Bonds	<input type="checkbox"/>	***63/75	1040-8b; 1040A-8b	

* Verify if comment on SAR or reason to believe benefits were reported incorrectly or received and not reported.
 ** Verify if reported or if reason to believe benefit was received and not reported.
 *** Combined for this SAR item. Broken out on FAFSA worksheet #2.

Verification Status Code: N A W T C R S

Net error of items not checked: \$
 (\$400 or less)

NOTES:

Verification Performed By:

Date:

PRACTICE (cont'd)



1997-98 Student Aid Report (SAR) Federal Student Aid Programs Part 1 - Information Summary

Form Approved
Exp. 12/31/98

503-01-0004
JA-01 PIN: 2154

IMPORTANT: Read ALL information in Part 1 to find out what to do with this Report.

000,001C001

CHRIS B. JACKSON
2912 BLUEFIELD COURT
ROCKVILLE MD 20906

Page 1 of 4

March 14, 1997
EFC: 00000

Read this letter carefully and review each item on Part 2 of this Student Aid Report (SAR). Follow the instructions at the top of Part 2 and in the Free Application for Federal Student Aid (FAFSA) instruction booklet to help you make corrections. For additional help with your SAR, contact your Financial Aid Administrator (FAA).

If all the information on this SAR is correct, you may be eligible to receive a Federal Pell Grant and other Federal student aid in 1997-98. Your FAA will determine whether you meet all eligibility requirements to receive aid. The amount of aid will depend on the cost of attendance at your school, your enrollment status (full-time, three-quarter-time, half-time, or less than half-time), Congressional budget restrictions, and other factors.

HERE IS WHAT YOU NEED TO DO NOW: Review the information on Part 2. If any of the information is incorrect, follow the instructions at the top of Part 2 to make corrections. IF ALL THE INFORMATION IS CORRECT, you should submit a photocopy of this SAR to all the schools that you may be interested in attending. Submit the original to the school where you actually enroll.

ATTENTION: We were unable to find any schools you listed on our school file, or you did not list any schools on your application, or did not verify any schools on your renewal application. To receive Federal student aid, you must attend a school that participates in the Federal student aid programs. Check with each school you are considering in 1997-98 to find out if it participates in these programs. Contact your FAA for assistance to make the necessary corrections to your SAR.

R4ED1000001

503-01-0004 JA 01

PRACTICE (cont'd)

This section contains information from your student aid application. Unshaded items display parents' information, if provided. Use the Information Review Form (Part 2 of your SAR) to correct this information. Do not make corrections on this page.

1. LAST NAME	JACKSON
2. FIRST NAME	CHRIS
3. MIDDLE INITIAL	3
4. PERMANENT STREET ADDRESS	2912 BLUEFIELD COURT
5. CITY	ROCKVILLE
6. STATE ABBREVIATION	MD
7. ZIP CODE	20906
8. SOCIAL SECURITY NUMBER	503-01-0004
9. DATE OF BIRTH	JULY 10, 1979
10. PERMANENT HOME PHONE NUMBER	301-111-0200
11. STATE OF LEGAL RESIDENCE ABBREVIATION	MD
12. DATE YOU BECAME A LEGAL RESIDENT	OCTOBER 01, 1993
13. DRIVER'S LICENSE STATE ABBREVIATION	
14. DRIVER'S LICENSE NUMBER	
15. CITIZENSHIP STATUS	U.S. CITIZEN
16. ALIEN REGISTRATION NUMBER	
17. MARITAL STATUS	UNMARRIED
18. DATE OF MARITAL STATUS	(BLANK)
19. FIRST BACHELOR'S DEGREE BY 7-1-1977	NO
20. HIGH SCHOOL GRADUATION DATE	JUNE 1997
21. GED DIPLOMA DATE	(BLANK)
22. FATHER'S EDUCATIONAL LEVEL	HIGH SCHOOL
23. MOTHER'S EDUCATIONAL LEVEL	HIGH SCHOOL
24. ENROLLMENT STATUS SUMMER TERM 1997	NOT ENROLLED
25. ENROLLMENT STATUS FALL SEM/OTR 1997	FULL TIME
26. ENROLLMENT STATUS WINTER OTR 1997-98	NOT ENROLLED
27. ENROLLMENT STATUS SPRING SEM/OTR 1998	FULL TIME
28. ENROLLMENT STATUS SUMMER TERM 1998	NOT ENROLLED
29. COURSE OF STUDY	COMPUTER SCIENCE
30. TYPE OF DEGREE/CERTIFICATE	1ST BA
31. DATE EXPECT TO RECEIVE DEGREE	MAY 15, 2001
32. GRADE LEVEL IN COLLEGE IN 1997-98	1ST NEVER ATTENDED
33. INTERESTED IN STUDENT EMPLOYMENT?	YES
34. INTERESTED IN STUDENT LOANS?	YES
35. INTERESTED IN PARENT LOANS?	NO
36. ATTENDING SAME COLLEGE IN 1997-98?	(BLANK)
37. WILL PAY DEPENDENT CARE FOR HOW MANY?	00
38. MONTHLY VA BENEFITS AMOUNT	5 0
39. HOW MANY MONTHS RECEIVE VA BENEFITS?	00
40. BORN BEFORE 1-1-77?	NO
41. VETERAN OF U.S. ARMED FORCES?	NO
42. ENROLLED IN GRADUATE PROGRAM 1997-98?	NO
43. ARE YOU MARRIED?	NO
44. ORPHAN OR HARD OF HEARING?	NO
45. HAVE DEPENDENTS OTHER THAN SPOUSE?	NO
46. NUMBER OF FAMILY MEMBERS IN 1997-98	
47. NUMBER IN COLLEGE IN 1997-98	
48. PARENT(S) MARITAL STATUS	MARRIED
49. PARENT(S) STATE OF LEGAL RESIDENCE	MD
50. DATE PARENT(S) BECAME LEGAL RESIDENT	OCTOBER 01, 1993
51. NUMBER OF FAMILY MEMBERS IN 1997-98	06
52. NUMBER IN COLLEGE IN 1997-98	2
53. TYPE OF 1996 TAX FORM USED	NOT FILED
54. EXEMPTIONS CLAIMED	
55. ADJUSTED GROSS INCOME FROM IRS FORM	5
56. U.S. INCOME TAX PAID	5
57. STUDENT'S INCOME EARNED FROM WORK	5
58. SPOUSE'S INCOME EARNED FROM WORK	5
59. EARNED INCOME CREDIT	5
60. ANNUAL SOCIAL SECURITY BENEFITS	5
61. ANNUAL AFDC/ADC	5
62. ANNUAL CHILD SUPPORT RECEIVED	5
63. OTHER UNTAXED INCOME	5
64. 1996 AMOUNT FROM LINE 5, WORKSHEET #3	5
65. TYPE OF 1996 TAX FORM USED	COMPLETED 10-0A/ET/TEL
66. EXEMPTIONS CLAIMED	06
67. ADJUSTED GROSS INCOME FROM IRS FORM	5 22,261
68. U.S. INCOME TAX PAID	5 363
69. FATHER'S INCOME EARNED FROM WORK	5 8,556
70. MOTHER'S INCOME EARNED FROM WORK	5 13,675
71. EARNED INCOME CREDIT	5
72. ANNUAL SOCIAL SECURITY BENEFITS	5
73. ANNUAL AFDC/ADC	5
74. ANNUAL CHILD SUPPORT RECEIVED	5
75. OTHER UNTAXED INCOME	5
76. 1996 AMOUNT FROM LINE 5, WORKSHEET #3	5
77. CASH, SAVINGS, AND CHECKING	5 350
78. OTHER REAL ESTATE/INVESTMENT VALUE	5
79. OTHER REAL ESTATE/INVESTMENT DEBT	5
80. BUSINESS VALUE	5
81. BUSINESS DEBT	5
82. INVESTMENT FARM VALUE	5
83. INVESTMENT FARM DEBT	5
84. AGE OF OLDER PARENT	48
85. CASH, SAVINGS, AND CHECKING	5 1,000
86. OTHER REAL ESTATE/INVESTMENT VALUE	5
87. OTHER REAL ESTATE/INVESTMENT DEBT	5
88. BUSINESS VALUE	5
89. BUSINESS DEBT	5
90. INVESTMENT FARM VALUE	5
91. INVESTMENT FARM DEBT	5
92. FIRST COLLEGE NAME	
93. FIRST HOUSING STATUS	WITH PARENT(S)
94. SECOND COLLEGE NAME	
95. SECOND HOUSING STATUS	(BLANK)
96. THIRD COLLEGE NAME	
97. THIRD HOUSING STATUS	(BLANK)
98. FOURTH COLLEGE NAME	
99. FOURTH HOUSING STATUS	(BLANK)
100. FIFTH COLLEGE NAME	
101. FIFTH HOUSING STATUS	(BLANK)
102. SIXTH COLLEGE NAME	
103. SIXTH HOUSING STATUS	(BLANK)
104. SHOULD DATA BE RELEASED TO STATE?	YES
105. REGISTER YOU FOR SELECTIVE SERVICE?	(BLANK)
106. SIGNED BY?	BOTH
107. DATE COMPLETED	JANUARY 24, 1997
108. PREPARER'S EIN	(BLANK)
109. PREPARER'S SOCIAL SECURITY NUMBER	(BLANK)
110. PREPARER'S SIGNATURE	(BLANK)

503-01-0004 JA 01

PRACTICE (cont'd)

Form 1040A (99) Department of the Treasury—Internal Revenue Service U.S. Individual Income Tax Return 1996 IRS Use Only—Do not write or staple in this space.

Label (See instructions.) Use the IRS label. Otherwise, please print in ALL CAPITAL LETTERS.

OMB No. 1545-0085

Your first name: **SHELDON** Last name: **JACKSON**

If a joint return, spouse's first name: **ANNE** Last name: **JACKSON**

Home address (number and street). If you have a P.O. box, see instructions. Apt. no.: **2912 BLUEFIELD COURT**

City, town or post office. If you have a foreign address, see instructions. State: **MD** ZIP code: **20906**

Your social security number: **987-65-4321**

Spouse's social security number: **876-54-3210**

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Note: Checking "Yes" will not change your tax or reduce your refund.

Presidential Election Campaign Fund (See instructions.)

Do you want \$3 to go to this fund? **Yes** **No**

If a joint return, does your spouse want \$3 to go to this fund? **Yes** **No**

1 ☐ Single

2 ☒ Married filing joint return (even if only one had income)

3 ☐ Married filing separate return. Enter spouse's social security number above and full name here: _____

4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here: _____

5 ☐ Qualifying widow(er) with dependent child (year spouse died **19**). (See instructions.)

6a ☒ Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a.

b ☒ Spouse

c Dependents. If more than six dependents, see instr.

(1) First name	Last name	(2) Dependent's social security number. If born in Dec. 1996, see instructions.	(3) Dependent's relationship to you	(4) No. of months lived in your home in 1996
CHRIS	JACKSON	503-01-0004	DAUGHTER	12
PAUL	JACKSON		SON	12
SARAH	JACKSON		DAUGHTER	12
LOREN	JACKSON		DAUGHTER	12

No. of boxes checked on 6a and 6b: **2**

No. of your children on line 6c who: **4**

- lived with you
- did not live with you due to divorce or separation (see instr.)
- Dependents on 6c not entered above

Add numbers entered in boxes above: **6**

d Total number of exemptions claimed: **6**

7 Wages, salaries, tips, etc. This should be shown in box 1 of your W-2 form(s). Attach Form(s) W-2. 7 \$ **22,461.00**

8a Taxable interest. If over \$400, attach Schedule 1. 8a \$ **0**

b Tax-exempt interest. DO NOT include on line 8a. 8b \$ **0**

9 Dividends. If over \$400, attach Schedule 1. 9 \$ **0**

10a Total IRA distributions. 10a \$ **0** 10b Taxable amount (see instructions). 10b \$ **0**

11a Total pensions and annuities. 11a \$ **0** 11b Taxable amount (see instructions). 11b \$ **0**

12 Unemployment compensation. 12 \$ **0**

13a Social security benefits. 13a \$ **0** 13b Taxable amount (see instructions). 13b \$ **0**

14 Add lines 7 through 13b (far right column). This is your total income. 14 \$ **22,461.00**

15a Your IRA deduction (see instructions). 15a \$ **0**

b Spouse's IRA deduction (see instructions). 15b \$ **0**

c Add lines 15a and 15b. These are your total adjustments. 15c \$ **0**

16 Subtract line 15c from line 14. This is your adjusted gross income. If under \$28,495 (under \$9,500 if a child did not live with you), see the instructions for line 29c. 16 \$ **22,461.00**

KIA Attach copy B of W-2 and 1099-R here.

1996 Form 1040A page 1

PRACTICE (cont'd)

1996 Form 1040A page 2

17 Enter the amount from line 16. 17 \$ 22,461.00

18a Check if: ☐ You were 65 or older ☐ Blind ☐ Spouse was 65 or older ☐ Blind Enter number of boxes checked ▶ 18a 0

b If you are married filing separately and your spouse itemizes deductions, see instructions and check here ▶ 18b ☐

19 Enter the standard deduction for your filing status. But see instructions if you checked any box on line 18a or b OR someone can claim you as a dependent.
• Single—4,000 • Married filing jointly or Qualifying widow(er)—6,700
• Head of household—5,900 • Married filing separately—3,350

19 \$ 6,700

20 Subtract line 19 from line 17. If line 19 is more than line 17, enter 0.

20 \$ 15,761.00

21 Multiply \$2,550 by the total number of exemptions claimed on line 6d.

21 \$ 15,300.00

22 Subtract line 21 from line 20. If line 21 is more than line 20, enter 0. This is your taxable income. If you want the IRS to figure your tax, see instructions.

22 \$ 461.00

23 Find the tax on the amount on line 22 (see instructions).

23 \$ 69.00

24a Credit for child and dependent care expenses. Attach Schedule 2. 24a \$ 0

b Credit for the elderly or the disabled. Attach Schedule 3. 24b \$ 0

c Add lines 24a and 24b. These are your total credits. 24c \$ 0

25 Subtract line 24c from line 23. If line 24c is more than line 23, enter 0.

25 \$ 69.00

26 Advance earned income credit payments from Form(s) W-2.

26 \$ 0

27 Household employment taxes. Attach Schedule H.

27 \$ 0

28 Add lines 25, 26, and 27. This is your total tax.

28 \$ 69.00

29a Total Federal income tax withheld from Forms W-2 and 1099. 29a \$ 369.00

b 1996 estimated tax payments and amount applied from 1995 return. 29b \$ 0

c Earned income credit. Attach Sched. EIC if you have a qualifying child. 29c \$ 0

Nontaxable earned income: amount ▶ \$ and type ▶

d Add lines 29a, 29b, and 29c (do not include nontaxable earned income). These are your total payments. 29d \$ 369.00

30 If line 29d is more than line 28, subtract line 28 from line 29d. This is the amount you overpaid. 30 \$ 300.00

31a Amount of line 30 you want refunded to you. If you want it sent directly to your bank account, see instructions and fill in 31b, c, and d.

31a \$ 300.00

b Routing number c Type: ☐ Checking ☐ Savings

d Account number

32 Amount of line 30 you want applied to your 1997 estimated tax. 32 \$ 0

33 If line 28 is more than line 29d, subtract line 29d from line 28. This is the amount you owe. For details on how to pay, including what to write on your payment, see instructions. 33 \$ 0

34 Estimated tax penalty (see instructions). 34 \$ 0

Sign here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Keep a copy of this return for your records.

Paid preparer's use only

Your signature Sheldon Jackson
Date 4/1/97
Spouse's signature (if joint return, BOTH must sign) Anne Jackson
Date 4/1/97

Your occupation Construction Worker
Spouse's occupation Secretary

Preparer's signature
Firm's name (or yours if self-employed) and address

Check if self-employed ☐

Preparer's SSN

EIN
ZIP code

KIA

1996 Form 1040A page 2



U.S. Department
of Education

1997-98 Verification Worksheet

Federal Student Aid Programs

FORM APPROVED
OMB NO. 1840-0132
EXP. DATE 12/31/98

DEPENDENT
STUDENT

Your application was selected for review in a process called "Verification." In this process, your school will be comparing information from your application with signed copies of your and your parent(s)' 1996 Federal tax forms, or with W-2 forms or other financial documents. The law says we have the right to ask you for this information before awarding Federal aid. If there are differences between your application information and your financial documents, you may need to send in corrections on your Student Aid Report (SAR), or your school may send corrections electronically, to have your information reprocessed.

Try to complete verification as soon as possible, so that your financial aid won't be delayed. Your financial aid administrator will help you.

What you should do

1. Collect your and your parent(s)' financial documents (signed Federal income tax forms, W-2 forms, etc.).
2. Talk to your financial aid administrator if you have questions about completing this worksheet.
3. Fill in and sign the worksheet—you and at least one parent.
4. Take the completed worksheet, tax forms, and any other documents your school needs to your financial aid administrator.
5. Your financial aid administrator will compare information on the documents. You may need to make corrections on your SAR and send it back to the application processor.

Your school must review the requested information, under the financial aid program rules (CFR Title 34, Part 668).

A. Student Information

JACKSON, Chris B.		503-01-0004
Last name	First name	Social security number
2912 BLUEFIELD COURT		July 10, 1979
Address (include apt. no.)		Date of birth
Rockville, Maryland 20906		(301) 111-0000
City	State	ZIP code
		Phone number (include area code)

B. Family Information

List the people that your parent(s) will support between July 1, 1997 and June 30, 1998. Include:

- yourself
- your parent(s)
- your parent(s)' dependent children (if your parent(s) provide more than half support, or if they would be required to give parental information when applying for Federal student aid.)

Include other people as part of your family only if:

- they lived with your parent(s) and got more than half their support from your parent(s) at the time you completed your student aid application
- AND
- they will continue to get more than half their support from July 1, 1997 through June 30, 1998.

Write the names of all family members. Also write in the name of the college for any family member who will be attending college at least half-time between July 1, 1997 and June 30, 1998, and will be enrolled in a degree or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	College
Janet Jones	51	Mother	Central University
Chris B. Jackson	18	Self	Thesapeake State U.
Sheeldon JACKSON	48	Father	
Anne JACKSON	47	Mother	
Paul JACKSON	20	brother	Loyola University
SARAH JACKSON	15	Sister	
LOREN JACKSON	12	Sister	

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1840-0132. The time required to complete this information collection is estimated to average twelve minutes, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: Application and Pell Processing Systems Division, U.S. Department of Education, 600 Independence Avenue, S.W., Washington, DC 20202-5453.

PRACTICE (cont'd)

C. Student's Tax Forms and Income Information

Dependent

1. For non-tax filers and all tax filers (includes the 1996 IRS Form 1040, 1040A, 1040EZ, Telefile worksheet, a tax return from Puerto Rico or a foreign income tax return). If you did not keep a copy of the tax return, request an RTFTP printout or Letter 1722 from the Internal Revenue Service or a copy from your tax preparer.

- ☐ Check and attach signed tax return.
☐ Check and complete: signed tax return will be mailed to the school by _____ (date).
☐ Check here if you will not file and are not required to file a 1996 U.S. Income Tax Return.

2. Amounts received for child support and other untaxed income.

Sources of untaxed income	Amount

3. If you did not file and are not required to file a 1996 Federal income tax return, list below your employer(s) and any income received in 1996.

Sources (Use the W-2 form or other earnings statements.)	Amount

D. Parent(s) Tax Forms and Income Information

1. For non-tax filers and all tax filers (includes the 1996 IRS Form 1040, 1040A, 1040EZ, Telefile worksheet, a tax return from Puerto Rico or a foreign income tax return). If your parent(s) did not keep a copy of the tax return, request an RTFTP printout or Letter 1722 from the Internal Revenue Service or a copy from the tax preparer.

- ☒ Check and attach signed tax return.
☐ Check and complete: signed tax return will be mailed to the school by _____ (date).
☐ Check here if your parent(s) will not file and are not required to file a 1996 U.S. Income Tax Return.

2. Amounts received for child support and other untaxed income.

Sources of untaxed income	Amount

3. If your parent(s) did not file and are not required to file a 1996 Federal income tax return, list below your parent(s) employer(s) and any income received in 1996.

Sources (Use the W-2 form or other earnings statements.)	Amount

E. Sign this Worksheet

By signing this worksheet, we certify that all the information reported to qualify for Federal student aid is complete and correct. 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.

Chris D. Jackson
 Student _____ Date _____
Sheldon Jackson
 Father/Stepfather _____ Date _____

Anne Jackson 5/23/97
 Mother/Stepmother _____ Date _____

Do not mail this worksheet to your application processor. Take it to your Financial Aid Administrator. Don't forget your tax forms.

PRACTICE (cont'd)



U.S. Department
of Education

1997-98 Verification Worksheet

Federal Student Aid Programs

FORM APPROVED
OMB NO 1840-0132
EXP DATE 12/31/98

**DEPENDENT
STUDENT**

Your application was selected for review in a process called "Verification." In this process, your school will be comparing information from your application with signed copies of your and your parent(s)' 1996 Federal tax forms, or with W-2 forms or other financial documents. The law says we have the right to ask you for this information before awarding Federal aid. If there are differences between your application information and your financial documents, you may need to send in corrections on your Student Aid Report (SAR), or your school may send corrections electronically, to have your information reprocessed.

Try to complete verification as soon as possible, so that your financial aid won't be delayed. Your financial aid administrator will help you.

What you should do

1. Collect your and your parent(s)' financial documents (signed Federal income tax forms, W-2 forms, etc.).
2. Talk to your financial aid administrator if you have questions about completing this worksheet.
3. Fill in and sign the worksheet—you and at least one parent.
4. Take the completed worksheet, tax forms, and any other documents your school needs to your financial aid administrator.
5. Your financial aid administrator will compare information on the documents. You may need to make corrections on your SAR and send it back to the application processor.

Your school must review the requested information, under the financial aid program rules (CFR Title 34, Part 668).

A. 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)

B. Family Information

List the people that your parent(s) will support between July 1, 1997 and June 30, 1998. Include:

- yourself
- your parent(s)
- your parent(s)' dependent children (if your parent(s) provide more than half support, or if they would be required to give parental information when applying for Federal student aid.)

Include other people as part of your family only if:

- they lived with your parent(s) and got more than half their support from your parent(s) at the time you completed your student aid application
- AND
- they will continue to get more than half their support from July 1, 1997 through June 30, 1998.

Write the names of all family members. Also write in the name of the college for any family member who will be attending college at least half-time between July 1, 1997 and June 30, 1998, and will be enrolled in a degree or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	College
Janet Jones	51	Mother	Central University
		Self	

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PRACTICE (cont'd)

C. Student's Tax Forms and Income Information

Dependent

1. For non-tax filers and all tax filers (includes the 1996 IRS Form 1040, 1040A, 1040EZ, Telefile worksheet, a tax return from Puerto Rico or a foreign income tax return). If you did not keep a copy of the tax return, request an RTFTP printout or Letter 1722 from the Internal Revenue Service or a copy from your tax preparer.

- ☐ Check and attach signed tax return.
☐ Check and complete: signed tax return will be mailed to the school by _____ (date).
☐ Check here if you will not file and are not required to file a 1996 U.S. Income Tax Return.

2. Amounts received for child support and other untaxed income.

Sources of untaxed income	Amount

3. If you did not file and are not required to file a 1996 Federal income tax return, list below your employer(s) and any income received in 1996.

Sources (Use the W-2 form or other earnings statements.)	Amount

D. Parent(s)' Tax Forms and Income Information

1. For non-tax filers and all tax filers (includes the 1996 IRS Form 1040, 1040A, 1040EZ, Telefile worksheet, a tax return from Puerto Rico or a foreign income tax return). If your parent(s) did not keep a copy of the tax return, request an RTFTP printout or Letter 1722 from the Internal Revenue Service or a copy from the tax preparer.

- ☐ Check and attach signed tax return.
☐ Check and complete: signed tax return will be mailed to the school by _____ (date).
☐ Check here if your parent(s) will not file and are not required to file a 1996 U.S. Income Tax Return.

2. Amounts received for child support and other untaxed income.

Sources of untaxed income	Amount

3. If your parent(s) did not file and are not required to file a 1996 Federal income tax return, list below your parent(s)' employer(s) and any income received in 1996.

Sources (Use the W-2 form or other earnings statements.)	Amount

E. Sign this Worksheet

By signing this worksheet, we certify that all the information reported to qualify for Federal student aid is complete and correct. 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 _____ Date _____

Father/Stepfather _____ Date _____

Mother/Stepmother _____ Date _____

Do not mail this worksheet to your application processor. Take it to your Financial Aid Administrator. Don't forget your tax forms.

PRACTICE (cont'd)



U.S. Department
of Education

1997-98 Verification Worksheet

Federal Student Aid Programs

FORM APPROVED
OMB NO. 1840-0132
EXP. DATE 12/31/98

**INDEPENDENT
STUDENT**

What you should do

Your application was selected for review in a process called "Verification." In this process, your school will be comparing information from your application with signed copies of your (and your spouse's, if you are married) 1996 Federal tax forms, or with W-2 forms or other financial documents. The law says we have the right to ask you for this information before awarding Federal aid. If there are differences between your application information and your financial documents, you may need to send in corrections on your Student Aid Report (SAR), or your school may send corrections electronically, to have your information reprocessed.

Try to complete verification as soon as possible, so that your financial aid won't be delayed. Your financial aid administrator will help you.

1. Collect your (and your spouse's) financial documents (signed Federal income tax forms, W-2 forms, etc.).
2. Talk to your financial aid administrator if you have questions about completing this worksheet.
3. Fill in and sign the worksheet.
4. Take the completed worksheet, tax forms, and any other documents your school needs to your financial aid administrator.
5. Your financial aid administrator will compare information on the documents. You may need to make corrections on your SAR and send it back to the application processor.

Your school must review the requested information, under the financial aid program rules (CFR Title 34, Part 668).

A. 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)

B. Family Information

List the people that you (and your spouse) will support between July 1, 1997 and June 30, 1998. Include:

- yourself
- your spouse
- your dependent children (if you provide more than half of their support).

Include other people as part of your family only if:

- they lived with you and got more than half their support from you (or your spouse) at the time you completed your student aid application
- AND
- they will continue to get more than half their support from you from July 1, 1997 through June 30, 1998.

Write the names of all family members. Also write in the name of the college for any family member who will be attending college at least half-time between July 1, 1997 and June 30, 1998, and will be enrolled in a degree or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	College
Martha Jones	24	Wife	City University
		Self	

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1840-0132. The time required to complete this information collection is estimated to average twelve minutes, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: Application and Pell Processing Systems Division, U.S. Department of Education, 600 Independence Avenue, S.W., Washington, DC 20202-5453.

PRACTICE (cont'd)

C. Student's Tax Forms and Income Information Independent

1. For non-tax filers and all tax filers (includes the 1996 IRS Form 1040, 1040A, 1040EZ, Telefile worksheet, a tax return from Puerto Rico or a foreign income tax return). If you did not keep a copy of the tax return, request an RTFTP printout or Letter 1722 from the Internal Revenue Service or a copy from your tax preparer.

- ☐ Check and attach signed tax return.
☐ Check and complete: signed tax return will be mailed to the school by _____ (date).
☐ Check here if you will not file and are not required to file a 1996 U.S. Income Tax Return.

2. Amounts received for child support and other untaxed income.

Sources of untaxed income	Amount

3. If you did not file and are not required to file a 1996 Federal income tax return, list below your employer(s) and any income received in 1996.

Sources (Use the W-2 form or other earnings statements.)	Amount

D. Spouse's Tax Forms and Income Information (If student is married)

1. For non-tax filers and all tax filers (includes the 1996 IRS Form 1040, 1040A, 1040EZ, Telefile worksheet, a tax return from Puerto Rico or a foreign income tax return). If your spouse did not keep a copy of the tax return, request one from the Internal Revenue Service or from the tax preparer.

- ☐ Check and attach signed tax return.
☐ Check and complete: signed tax return will be mailed to the school by _____ (date).
☐ Check here if you will not file and are not required to file a 1996 U.S. Income Tax Return.

2. Amounts received for child support and other untaxed income.

Sources of untaxed income	Amount

3. If your spouse did not file and is not required to file a 1996 Federal income tax return, list below your spouse's employer(s) and any income received in 1996.

Sources (Use the W-2 form or other earnings statements.)	Amount

E. Sign this Worksheet

By signing this worksheet, I (we) certify that all the information reported to qualify for Federal student aid is complete and correct. If married, spouse's signature is optional.

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

Student _____ Date _____

Spouse _____ Date _____

Do not mail this worksheet to your application processor. Take it to your Financial Aid Administrator. Don't forget your tax forms.