

2018-2019 Verification of Additional Income

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, the AU WCL Financial Aid Office will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and your spouse, if applicable, must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the AU WCL Financial Aid Office. A counselor will contact you if any additional information is needed. Verification cannot be completed until all required documentation has been received by the AU WCL Financial Aid Office.

Student's Printed Name _____

AU ID# _____

Complete all sections of this form. If more space is needed, provide a separate page with the student's name and ID# at the top. If any item does not apply or if there was no income, enter 'N/A' for Not Applicable where a response is requested or enter a '0' in an area where an amount is requested. Provide information for the student and spouse, if applicable.

2016 IRS W-2 forms: Provide copies of all 2016 IRS W-2 forms issued by the employers to the student and spouse, if applicable, whose information is on the FAFSA.

To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2016, multiply that amount by the number of months in 2016 you paid or received it. If you did not pay or receive the same amount each month in 2016, add together the amounts paid or received each month.

A. Child Support Paid

List the actual amount of any child support **paid by the student or spouse, if applicable**, in 2016 because of divorce or separation or as a result of a legal requirement. **Do not** include support paid for children you included as part of the number in household on your 2018-2019 FAFSA.

Name of Adult Who Paid the Support	Name of Child for Whom Support Was Paid	Amount of Child Support Paid in 2016

B. Taxable Earnings from Need-Based Employment

Include taxable need-based employment earnings from Federal Work Study and/or from need-based employment portions of fellowships and assistantships. **If you do not have a W2 for the earnings reported, attach documentation from your school verifying the amount of need-based wages earned.**

Name of Student who Earned the Need-Based Wages	Name and Title IV School Code of School that paid the Need-based Earnings	Amount of Need Based Earnings Received in 2016

C. Taxable College Grant and Scholarship Aid Reported to the IRS as Income

Only list the amount that you included as income in your Adjusted Gross Income for 2016. Include grants, scholarships, AmeriCorps benefits (awards, living allowances, and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships. **You must attach documentation from your 2016 tax return showing the amount that was included in your 2016 income.**

Name of Scholarship Recipient	Name of Tax Payer who Claimed the Income on their 2016 IRS Tax Return	Amount of Scholarship Included as Income on 2016 IRS Tax Return

D. Taxable Combat Pay

Enter the amount of taxable combat pay or special combat pay. Only enter the amount that was taxable and included in your 2016 IRS adjusted gross income. Don't include untaxed portions of combat pay. ***You must provide a copy of the earnings and leave statement for any income listed below.***

Name of Recipient	Amount of Combat Pay included in your 2016 IRS Adjusted Gross Income.

E. Cooperative Education Program Earnings

List any earnings from work under a cooperative education program offered by a college. ***If you do not have a W2 for the earnings reported, attach documentation from your school verifying the amount of need-based wages earned.***

Name of Student with Cooperative Education Program Earnings	Name and Title IV School Code of School that paid the Cooperative Education Program Earnings	Amount of Cooperative Education Program Earnings Received in 2016

Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct.

The student and spouse, if applicable, whose information was reported the FAFSA must sign and date.

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

Student's Signature (Required)

Date

Spouse's Signature (If Applicable)

Date

***Do not mail this worksheet to the U.S. Department of Education.
Submit this worksheet to the AU Financial Aid Office via fax at 202-274-4107 or to the address below.
You should make a copy of this worksheet for your records.***