

VERIFICATION WORKSHEET DEPENDENT STUDENT

OFFICE OF STUDENT FIN	ANCIAL	SERVICES
FINANCIAI	AID	

Student's Name	•	First			NDid					NDid				
Las														
STEP 1 - Household Information – 2018-19 Academic Year														
Parents' Marital Status		farried	Divorced		Unmarried, livi	ng together		Unmarried, not	living together					
(Select One)	☐ Se	parated	Widowed		Single adopti	ve parent		Single, donor c	onceived child					
 Carefully read the instructions and, in the chart below, include: Student Student's legal parent(s) – biological or adoptive If your legal parents are married or not married, separated, or divorced but live together, list both parents. If your legal parents are separated or divorced (and do not live together), list the parent who you lived with most during the last 12 months. If remarried, list legal parent and stepparent. If your parent was never married (and does not live with your other legal parent) or widowed (and not remarried), list that parent. If widowed and remarried, list legal parent and stepparent. Student's parent(s)' other dependent children if your parent(s) will provide more than half of their support from July 1, 2018 through June 30, 2019 (list these children even if they do not live with your parents) Other people only if they live with student's parent(s) and student's parent(s) provide more than half of their support and will continue to do so from July 1, 2018 through June 30, 2019 Provide college information for those attending at least half-time during the 2018-19 academic year in a program leading to a degree, diploma, or certificate 														
Full Name	Age	Relationsh	nip N	lame o	of College	Undergra Graduat		Half-time/ Full-time	Expected Grad Date					
		Student				Graduat		Tun time	Grad Date					
_														
STEP 2 - Student's 2	2016 Tax	Filing Stat	us											
Did you file or were you	required t	o file a 2016	U.S. Fede	ral In	come Tax Retu	ırn?								
Yes. Continue	to STEP 3.													
No, and I had	l no earni	ngs from w	ork. Con	itinue	to STEP 3.									
└── No, but I had	some ear	rnings from	work. S	Submi	t a <i>Student No</i>	n-Tax File	er's S	<i>Statement</i> and	all earnings					

statements (e.g., W-2, 1099-MISC) received in 2016. Continue to STEP 3.

STEP 3 - Parent(s)' 2016 Tax Filing Status Did your parent(s) file or were they required to file a 2016 U.S. Federal Income Tax Return? **Yes.** Continue to STEP 4. No, and my parent(s) had no earnings from work. Submit a Verification of Non-filing Letter from the IRS for 2016 (obtained online at irs.gov or by calling 1-800-908-9946). Continue to STEP4. No, but my parent(s) had some earnings from work. Submit the Parent Non-Tax Filer's Statement, all parent(s) earning statements (e.g., W-2, 1099-MISC) received in 2016, and a Verification of Non-filing Letter from the IRS for 2016 (obtained online at irs.gov or by calling 1-800-908-9946). Continue to STEP4. STEP 4 – Other 2016 Income Information Please report all applicable income information for the parent(s) and student below for the 2016 tax year. Please indicate \$0 in any field that does not apply. PARENT(S) **STUDENT** Child support **PAID** to another household during 2016 (attach separate sheet if needed). Paid to _____ Paid for _____ \$ Paid for _____ Paid to \$ Child support you **RECEIVED** for all children (including the student) in 2016. \$ Do not include foster care or adoption payments. Untaxed Social Security benefits – please submit a copy of the Social Security Benefit Statement (SSA-1099) for each family member who received social security benefits in 2016. Ś Taxable earnings from need-based employment programs, such as Federal Work-Study, AmeriCorps, and need-based portions of fellowships and assistantships. Ś Combat pay that was taxable and included in your adjusted gross income. \$ Housing, food, and other living allowance paid to members of (select one): military or ____ clergy (including cash payments and cash value of benefits). Do not include value of on-base housing or basic military allowance for housing. \$ Veterans non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-\$ Study allowances. \$ Other untaxed income not reported elsewhere (e.g., workers' compensation, \$ disability, etc.). Source: Money received or paid on your behalf (e.g., bills), not reported elsewhere on this form. Source: \$ STEP 5 - Certification I certify that all of the information reported on this worksheet is complete and correct. The student and student's parent must sign this worksheet. Electronic signatures are not acceptable.

Contact information provided below for email (preferred method) and mail.

University of Notre Dame | Office of Financial Aid | 115 Main Building | Notre Dame, IN 46556

Date _____

Student Signature Date

Please submit signed and completed form, along with supporting documentation, to the Office of Financial Aid.

Parent Signature