

2017-2018 Independent Verification Document

- Your Student Aid Report has been selected for verification. Federal regulation requires that we check the accuracy of the information you provided on your 2017-2018 FAFSA. Federal regulation states that before disbursing Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document 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 institutional verification form, attach any required documents, and submit these items to One-Stop Student Services. 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.
- Your financial aid award continues to be an **estimate** and is subject to change through the verification process. No offer of financial aid is authorized for disbursement until verification is complete.
- If a question does not apply to you or your spouse, **do not leave it blank**. Mark the answer zero or N/A for not applicable. Do not skip any questions. **If you skip a question or section, your entire packet may be marked as incomplete, delaying processing until a complete packet is received and reviewed.**
- IMPORTANT:** You cannot submit your 1040 to satisfy verification requirements. Rather, you must submit a signed 2015 **IRS Tax Return Transcript** along with your 2015 W2s and/or 2015 1099s. See Section I below for information on how to obtain an IRS Tax Return Transcript. NOTE: You may not need to submit a Tax Return Transcript if you successfully utilized the IRS data match when completing your FAFSA. If you did not have a successful IRS data match initially, you may still do so. Log in to your already completed FAFSA and select the data match option. Check the financial aid tab in your myWings account for your specific requirements.
- Please do not submit originals. Documents submitted to UNF will not be returned to you. If necessary, copies can be made at One-Stop for a small fee.
- All documents (including spouse's tax documents, if applicable) must have the student's name and UNF ID number clearly marked **at the top of every page submitted**.
- Submit completed documents to: Fax: **(904) 620-2414**. Or, drop off at One-Stop Student Services, Hicks Hall, building 53, suite 1700. Or, mail to: **UNF, Attention: Student Financial Aid, 1 UNF Drive, Jacksonville, FL 32224**.
- PLEASE** do not fax documents longer than 10 pages. Documents of more than 10 pages must be mailed or dropped off to UNF One-Stop Student Services.

Section I: Student and Spouse Information:

Student Name _____ UNF ID# N _____

Spouse Name _____ or I am not married

- A. Federal Benefit Programs** In 2015 or 2016, did you, your spouse or a member of your household receive benefits from any of the federal benefit programs listed below? Please mark all that apply.
- SSI (Supplemental Security Income) Free or Reduced Lunch WIC (Women, Infants, and Children)
- TANF (Temporary Assistance for Needy Families) SNAP (Supplemental Nutrition Assistance Program)
- SSA (Social Security Benefits)
- B. 2015 Tax Documents** If you filed a **2015** U.S. Federal Tax Return, and you did not or could not use the IRS data retrieval tool on your 2017-2018 FAFSA, you must submit a signed **2015 U.S. Federal Tax Return Transcript** and/or **2015** Puerto Rico or Foreign Tax return(s) for yourself **and your spouse (if applicable)**. You may obtain an official 2015 tax return transcript several ways:
- Use the "Get Transcript Online" tool from www.irs.gov/Individuals/Get-Transcript and receive a copy in real-time as a PDF, which may be submitted via fax to the school or printed as a hard copy. (This option may not be available.)
 - Use the "Get Transcript by Mail" option to submit a transcript request online and receive a transcript by mail.
 - Call 1-800-908-9946.
 - Use the IRS2Go mobile app.
 - Mail or fax IRS Form 4506 T or 4506T-EZ (available on the IRS website).

NOTE: A copy of the electronic cover sheet without the Tax Return Transcript is not acceptable and **will not** satisfy this requirement.

Student	Did you have income earned from work in 2015 ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Were you required to file a 2015 tax return?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Did you file a 2015 tax return?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Spouse	Did you have income earned from work in 2015 ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Not Applicable
	Were you required to file a 2015 tax return?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Not applicable
	Did you file a 2015 tax return?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Not applicable

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C. 2015 Non-Filers If you and/or your spouse were not required to file a **2015** income tax return, please list the employer name and amounts earned in **2015** in the spaces provided below. A **2015** W2 /1099 form from each listed employer **must** be submitted to verify **2015** income. Attach a separate sheet, if necessary.

Name of Non-Filer	Employer's Name	Amount Earned	W2/1099 provided?
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

Section II: Student's Household Size and Number in College

Complete sections A-C about the people you and your spouse (if applicable) will support more than 50% from July 1, 2017 through June 30, 2018.

A. List yourself and your spouse, if applicable, in your household. **Marital status should be based upon on your status at the time the 2017-2018 FAFSA was first completed.**

At the time the 2017-2018 FAFSA was first completed, your marital status was (check one option only).

never married married remarried separated divorced widowed

	Full Name	Age	Date of Birth	Relationship	College Name, City, State (if attending college 6+ hours)	Type of Degree
You			mm/ dd /yyyy	Self/Student	University of North Florida	
Spouse			mm/ dd /yyyy	Spouse		

B. List your children/step-children, even if they don't live with you, if you or your spouse (if applicable) provide more than 50% of their support and will continue to provide more than 50% of their support from July 1, 2017 through June 30, 2018. List anyone who will be enrolled at least half-time in a degree, diploma, or certificate program at an eligible postsecondary educational institution between July 1, 2017 and June 30, 2018. List the name, city and state of the college, as well as the type of degree being sought. For those not attending college, mark N/A for not applicable. Attach a separate sheet if necessary.

Full Name	Age	Date of Birth	Relationship to Student	College Name, City, State (if attending college 6+ hours)	Type of Degree
<i>Example: Ozzie Osprey</i>	<i>23</i>	<i>01 / 31 / 1994</i>	<i>Son</i>	<i>FSCJ, Jacksonville, FL</i>	<i>AA</i>
		mm/ dd /yyyy			
		mm/ dd /yyyy			
		mm/ dd /yyyy			
		mm/ dd /yyyy			
		mm/ dd /yyyy			

C. List any other people if they now live with you and your spouse (if applicable) and you provide more than 50% of their support and will continue to provide more than 50% of their support from July 1, 2017 through June 30, 2018. For anyone attending college half-time or more as a degree-seeking student, list the name, city and state of the college, as well as the type of degree being sought. For those not attending college, mark N/A for not applicable. Attach a separate sheet if necessary.

Full Name	Age	Date of Birth	Relationship to Student	College Name, City, State (if attending college 6+ hours)	Type of Degree
<i>Example: Harriet Osprey</i>	<i>80</i>	<i>02 / 18 / 1937</i>	<i>Mother</i>	<i>N/A</i>	<i>N/A</i>
		mm/ dd /yyyy			
		mm/ dd /yyyy			
		mm/ dd /yyyy			

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If anyone listed in sections B or C is not claimed as a dependent on your (or your spouse's) tax return, please clarify why they are being included in the household size. Attach a separate sheet if necessary.

Section III: Student and Spouse 2015 Additional Financial Information

Everyone must complete each question in this section. **Do not leave any blanks.** Answer each question with the correct amount, zero or N/A for not applicable. Amounts reported should be totaled **for the year**, not monthly amounts received.

In 2015, how much did you and/or your spouse (if applicable) receive in:	Spouse Yearly Amounts	Student Yearly Amounts
a. Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040 – line 50 or 1040A – line 33.	\$ _____	\$ _____
b. Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$ _____	\$ _____
c. Student grant and scholarship aid reported to the IRS in your adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments) as well as grant and scholarship portions of fellowships and assistantships.	\$ _____	\$ _____
d. Earnings from work under a cooperative education program offered by a college.	\$ _____	\$ _____
e. Combat pay or special combat pay. Only enter the amount that was taxable and included in your adjusted gross income. Don't include untaxed combat pay.	\$ _____	\$ _____

Student and Spouse 2015 Untaxed Income

a. Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S.	\$ _____	\$ _____
b. IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040 - line 28 + line 32 or 1040A - line 17.	\$ _____	\$ _____
c. Child support received for all children. Do not include foster care or adoption payments. Amount reported should be a total for the year 2015 , not the monthly amount received.	\$ _____	\$ _____
d. Tax exempt interest income from IRS Form 1040 – line 8b or 1040A—line 8b.	\$ _____	\$ _____
e. Untaxed portions of IRA distributions from IRS Form 1040 – lines (15a minus 15b) or 1040A – lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.	\$ _____	\$ _____
f. Untaxed portions of pensions from IRS Form 1040 – lines (16a minus 16b) or 1040A – lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.	\$ _____	\$ _____
g. Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). DO NOT include the value of on-base military housing or the value of a basic military allowance for housing.	\$ _____	\$ _____
h. Veterans non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$ _____	\$ _____
i. Money received, or paid on your behalf (e.g. bills), not reported elsewhere on this form.	\$ _____	\$ _____

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Section IV: Business Asset Clarification

1. Do you or your spouse own and control more than 50% of a business?

Student Yes No Does not own a business

Spouse Yes No Does not own a business

2. Does the business employ 100 or more full-time employees?

Student Yes No Does not own a business

Spouse Yes No Does not own a business

Section V: Other Asset Clarification

Amounts should be reported as of the day you filed your FAFSA. Do not leave any blanks. Answer each question with the correct amount, zero or N/A (not applicable).

	Spouse	Student
1. What is the value of your cash/checking/savings accounts?	\$ _____.	\$ _____.
2. What is the value of your investment net worth?	\$ _____.	\$ _____.

Net worth means the current value, as of the day you filed your FAFSA, of investments, businesses, and/or investment farms, minus debts related to those same investments, businesses and/or investment farms. When calculating net worth, use zero for investments or properties with a negative value.

Investments include real estate (do not include the home in which you live), rental property, trust funds, UGMA and UTMA accounts, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, installment and land sale contracts (including mortgages held), commodities, etc.

Investments do not include the home you live in, the value of life insurance, retirement/401[k] plans, pension funds, annuities, non-education IRAs, Keogh plans, etc.

3. What is the value of your business/farm net worth*	\$ _____.	\$ _____.
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***Do not report the value of a small business if your family owns and controls more than 50% of the business and the business has 100 or fewer full-time or full-time equivalent employees. Do not include the value of family farm that your family lives on and operates.**

Attach copies of ALL 2015 W2/1099 forms.

Attach signed copy of complete 2015 IRS Tax Return Transcript, if requested.

Section VI: Required Signatures

Please review all sections for COMPLETENESS and ACCURACY before signing.

Remember: Failure to answer ALL questions and submit signed and complete Tax Return Transcripts, W2 records, and other tax documents, including but not limited to 1099s, Social Security statements, and tax return schedules, will result in delayed processing of your file. Your state and federal financial aid awards will not disburse until your file has been fully verified.

By signing below, you and your spouse (if applicable) certify that all the information reported on this form and any attached documents is accurate and true. You acknowledge that it is your responsibility to monitor your financial aid for any updates or additional requests for documentation or clarification and respond in a timely manner. Warning: If you purposefully give false or misleading information, you may be fined, be sentenced to jail or both.

Student Signature

Date Signed

Spouse Signature (if applicable)

Date Signed

Received by: _____

Date: _____