

# 2019-2020 Independent Verification Document

- Your Student Aid Report has been selected for verification. Before disbursing aid, federal regulation requires us to review the accuracy of the information you provided on your 2019-2020 FAFSA. 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 throughout 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.**
- Submit completed documents via: myWings (Student Portal):** Student Records > Student Self-Service > Upload Student Documents | **Fax:** (904) 620-2414 | **Drop off:** One-Stop Student Services, Hicks Hall, Building 53, Suite 1700 | **Mail:** UNF, Attention: Student Financial Aid, 1 UNF Drive, Jacksonville, FL 32224
  - Please do not submit originals. Documents submitted to UNF will not be returned to you. If necessary, copies can be made at One-Stop Student Services 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**.
  - PLEASE** do not fax documents longer than 10 pages. Documents of more than 10 pages must be uploaded, mailed or dropped off to 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 2017 or 2018, did you, your spouse, or a member of your household receive benefits from any of the federal benefit programs listed below? Please check all that apply.

- SSI (Supplemental Security Income)                       WIC (Women, Infants, and Children)  
 SSA (Social Security Benefits)                               TANF (Temporary Assistance for Needy Families)

**B. 2017 Tax Documents** If you filed a **2017** U.S. Federal Tax Return, and you did not or could not use the IRS data retrieval tool on your 2019-2020 FAFSA, you must submit a signed 2017 tax return, signed 2017 U.S. Federal Tax Return Transcript, and/or **2017** Puerto Rico or Foreign Tax return(s) for yourself **and your spouse (if applicable)**. You may obtain an official 2017 tax return transcript several ways:

- Using the "Get Transcript Online" tool from the IRS Website to download a PDF copy of your IRS Tax Return Transcript. (This option is not available to all individuals.)
- Using the "Get Transcript by Mail" option on the IRS Website to have your IRS Tax Transcript mailed to you.
- Calling 1-800-908-9946 to request a copy of your IRS Tax Return Transcript.
- Downloading IRS Form 4506-T, "Request for Transcript of Tax Return," to mail to the IRS to request a copy of your IRS Tax Return Transcript.

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

<b>Student</b>	Did you have income earned from work in <b>2017</b> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Were you required to file a <b>2017</b> tax return?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Did you file a <b>2017</b> tax return?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Spouse</b>	Did you have income earned from work in <b>2017</b> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
	Were you required to file a <b>2017</b> tax return?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
	Did you file a <b>2017</b> tax return?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable

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## 2019-2020 Independent Verification Document

- C. **2017 Non-Fileers** If you and/or your spouse were not required to file a **2017** income tax return, please list the employer name and amounts earned in **2017** in the spaces provided below. A **2017** W2/1099 form from each listed employer **must** be submitted to verify **2017** 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, 2019 through June 30, 2020.

- A. List yourself and your spouse, if applicable, in your household. **Marital status should be based upon on your status at the time the 2019-2020 FAFSA was first completed.**

At the time the 2019-2020 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/stepchildren, 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, 2019 through June 30, 2020. 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, 2019 and June 30, 2020. 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>	23	01 / 31 / 1996	<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, 2019 through June 30, 2020. 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>	80	02 / 18 / 1939	<i>Mother</i>	<i>N/A</i>	<i>N/A</i>
		mm/ dd /yyyy			
		mm/ dd /yyyy			
		mm/ dd /yyyy			



# 2019-2020 Independent Verification Document

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.

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## Section III: Student and Spouse 2017 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 2017, how much did you and/or your spouse (if applicable) receive in:	Student Yearly Amounts	Spouse 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. <b>Don't include</b> untaxed combat pay.	\$	\$

Student and Spouse 2017 Untaxed Income	Student Yearly Amounts	Spouse Yearly Amounts
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. <b>Do not include</b> foster care or adoption payments. Amount reported should be a total for the <b>year</b> 2017, 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). <b>DO NOT</b> 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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N \_\_\_\_\_

# 2019-2020 Independent Verification Document

## Section IV: Business Asset Clarification

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

<b>Student</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Does not own a business
<b>Spouse</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Does not own a business

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

<b>Student</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Does not own a business
<b>Spouse</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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).

1. What is the value of your cash/checking/savings accounts?

Student	Spouse
\$ _____.	\$ _____.

2. What is the value of your investment net worth?

\$ _____.	\$ _____.
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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 a family farm that your family lives on and operates.**

**Attach copies of ALL 2017 W2/1099 forms.**

**Attach signed copy of complete 2017 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 Transcript(s), W2(s), and other tax documents, including but not limited to 1099(s), 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: \_\_\_\_\_