



Student Name: _____ Social Security Number: _____

Your application was selected for review in a process called "Verification." We are required by Federal Law (34 CFR, Part 668) to ask you for this information before awarding Federal aid. In this process, we will be comparing information from your application with tax documents, W2s and information you provide with this form. If there are differences, corrections will need to be made.

STEP 1- Family Information

INDEPENDENT STUDENTS: List the people in your household. Include:

- yourself (and your spouse)
• your children, if you will provide more than half of their support from July 1, 2017 through June 30, 2018
• other people if they now live with you, you provide more than half of their support and will continue to provide more than half of their support from July 1, 2017 through June 30, 2018

Table with 4 columns: Full Name, Age, Relationship, Name of College (if at least half-time). Includes a pre-filled row for 'Self' at 'University of Valley Forge'.

STEP 2- STUDENT TAX TRANSCRIPT AND INCOME INFORMATION - CALENDAR YEAR 2015

Are you or will you be required to file a 2015 Federal Tax Return? ___ Yes ___ No

If YES, skip ahead to STEP 3.

If NO, complete the table below and then continue to STEP 3.

A W2 copy must also be provided

***** OR Check the Line Below *****

___ The student was not employed and had no income earned from work in 2015

Table with 2 columns: Source of Income (Fill out only if you did NOT file taxes), Amount Earned in 2015. Includes a TOTAL row.

STEP 3 - SPOUSE TAX TRANSCRIPTS & INCOME INFORMATION - CALENDAR YEAR 2015

Are you or will you be required to file a 2015 Federal Tax Return? _____ Yes _____ No

If YES, skip ahead to STEP 4.

If NO, complete the table below and then continue to STEP 4.

A W2 copy must also be provided

***** ***OR Check the Line Below*** *****

_____ The parent was not employed and had no income earned from work in 2015

Source of Income (Fill out only if you did NOT file taxes)	Amount Earned in 2015
TOTAL	

STEP 4 - CERTIFICATION

By signing this worksheet, I (we) affirm that all information on this form and any attachments are complete and accurate to the best of my (our) knowledge. If requested, I (we) agree to provide documentation to support the information I (we) have provided on this form. I (we) understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I (we) may be subject to a fine, imprisonment, or both under provisions of the United States Criminal Code.

Student Name (Please Print)

Date

Student Signature