

2019-2020 Verification Worksheet Dependent Student

Office: 865-251-2303 Fax: 865-251-3333 FinancialAid@JohnsonU.edu

The Department of Education has selected your 2019–2020 Free Application for Federal Student Aid (FAFSA) for review in a process called "Verification." The law says that before awarding Federal Student Aid, your school may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information the Financial Aid Office will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences between your application information and your financial documents, Johnson or you may need to make corrections electronically or by updating your FAFSA. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the Financial Aid Office. Johnson may ask for additional information.

DEPENDENT STUDENT'S INFORMATION

Student's Last Name	First Name	M.I.	Student ID Number
Students Street Address (inclu	ude apt. no.)		Students Date of Birth
City	State	Zip Code	Students Email Address
Students Home Phone Num	ber (include area code)		Students Cell Phone Number

DEPENDENT STUDENT'S FAMILY INFORMATION

List the people in your parent(s) household.

Include children who meet any of the following, even if they do not live with your parent(s).

- · Children your parent(s) will provide more than half of their support from July 1, 2019, through June 30, 2020
- · Children required to provide parental information if they were completing a FAFSA for 2019–2020
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support from July 1, 2019, through June 30, 2020, i.e. grandparent, niece/nephew, etc.
- Student(s) enrolled at least half-time in a degree, diploma, or certificate program at a postsecondary institution any time between 7/1/19 and 6/30/20

NOTE: Individuals over the age of 24 are considered independent by FSA guidelines and should not be considered in the household.

Relationship	Full Name	Age	Name of College	Enrolled at Least Half Time in college
Parent 1				
Parent 2				
Self				
Sibling				
Sibling				
Sibling				
Other				
Other				

TAX FILING STATUS FOR 2017

Please complete the section below regarding tax filing status for 2017.

Check the box that applies to the STUDENT

The **student** was employed and filed a tax return for 2017.

The **student** was not employed and had no income earned from work in 2017.

The **student** was employed in 2017 but did not meet the minimum requirement to file a 2017 tax return. Copies of the 2017 W2's must be provided. If no employer W2 was provided, please list below the employer name and amount earned in 2017.

Employee's Name	Employer's Name	2017 Amount Earned	IRS W-2 Attached?

Check the box that applies to the PARENT

The **parent** was employed and filed a tax return for 2017.

The parent was not employed and had no income earned from work in 2017. See important note below.

The **parent** was employed in 2017 but did not meet the minimum requirement to file a 2017 tax return. Copies of the 2017 W2's must be provided. If no employer W2 was provided, please list below the employer name and amount earned in 2017.

Employee's Name	Employer's Name	2017 Amount Earned	IRS W-2 Attached?

IMPORTANT: If you are a nontax filing parent, you must provide documentation from the IRS indicating a 2017 IRS income tax return was not filed with the IRS. You must complete a 4506-T form and submit to the IRS for processing. You may also request proof online through the irs.gov site and provide a Tax Return Transcript stating that there no record on file for 2017.

CERTIFICATION AND SIGNATURES

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

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Student's Signature

Date

Parent's Signature

Date

All completed worksheets can be mailed to the address indicated below or faxed to 865-251-3333. Please send to the attention of: Financial Aid Office. Johnson University • 7900 Johnson Drive • Knoxville, Tennessee 37998 • JohnsonU.edu