

## UNIVERSITY OF ALASKA FAIRBANKS FINANCIAL AID OFFICE 107 EIELSON BUILDING, PO BOX 756360 FAIRBANKS, AK 99775-6360 (907) 474-7256 or 1-888-474-7256

Fax Number: (907) 474-7065 uaf-financialaid@alaska.edu

# **VERIFICATION WORKSHEET**

Name		Student ID		
Email		Phone		
TAX INFOI	RMA	TION (for tax year 2015)		
Student filing  Single or he		<u> </u>		
C		dent student) filing status:		
Single or he	•		<b>;</b>	
	•	our marital status has changed since filing your 2015 federal tax return, please inancial aid office before completing this form.		
2015 tax year	and di h this	f married students, and the parent(s) of dependent students who filed taxes for the id not use the FAFSA-IRS data retrieval tool must provide a signed copy of their 20 document. Check your financial aid requirements on UAonline to see if you need to.		
-		its and the parent(s) of dependent students who did not and will not file a federal tax tax year must complete a <u>statement of non-filing</u> form available at the Financial Aid		
Check one:		the student and/or parent(s) filed taxes and successfully used the FAFSA-IRS ta retrieval option when first submitting the FAFSA. Tax transcripts were not quested by the Financial Aid Office. (Check UAonline)		
		The student and/or parent(s) filed taxes, but did not use or were unable to use the FAFSA-IRS data retrieval option. A signed copy of the 2015 tax return(s) is attached.		
		The student and/or parent(s) did not and will not file taxes for 2015. Please attach the UAF Student/Parent Statement of Non-Filing.		

### HOUSEHOLD INFORMATION

In the chart below, list the names of all people in your household, their ages, and their relationship to you. If any of the people in your household (EXCEPT the parent(s) of a dependent student) are attending college, university, or another postsecondary training program at least half time, list the school they attend. Attach additional paper if necessary.

**Dependent students**, list the people in your parent(s)' household. Include:

- Yourself and your parent(s) (including a stepparent) even if you don't live with your parent(s).
- Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2017, through June 30, 2018, or if the other children would be required to provide parental information if they were completing a FAFSA for 2017–2018. Include children who meet either of these standards, even if they do not live with your parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2018.

## **Independent Students**, list the people in your household. Include:

- Yourself and your spouse, if you are married.
- Your children for whom you will provide more than half of their support from July 1, 2017 through June 30, 2018, or if the child would be required to provide your information if they were completing a FAFSA for 2017–2018. Include children who meet either of these standards, even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2018.

FULL NAME	AGE	RELATIONSHIP	NAME OF COLLEGE
		SELF	UAF

# **CERTIFICATION:**

### Read carefully before you sign:

I hereby certify that all information contained in this document is true and correct to the best of my knowledge. I understand that if I am found to have knowingly or intentionally given false or fraudulent statements and/or documentation, my eligibility for federal, state, and institutional student aid will be jeopardized. I authorize the University of Alaska Fairbanks to verify any information provided by me in this document and any other information pertaining to my financial aid eligibility.

<b>Note:</b> Federal regulations stipulate that suspicion of fraud must Education for possible investigation by the Office of the Inspect United States Attorney General.	*
Student Signature	Date
Parent Signature (required for DEPENDENT students)	Date