

OFFICE OF FINANCIAL AID

WHIPPLE BARN, 2ND FLOOR • HAMPTON, VA 23668 • TELEPHONE: 800-624-3341 (757) 727-5332

2018–2019 Verification Worksheet • Dependent Student (V1)

Your 2018–2019 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information we will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this worksheet, attach any required documents, and submit the form with any other required documents to the financial aid office. Please note that we may ask for additional documentation if we have reason to believe that the information provided is inaccurate. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

Dependent Student Information		HU S	tudent ID#		
Print Student Last Name		Print Student Fi	rst Name	Print Student M.I.	
Student Social Security Number	Student Primary Phone Number			Student Date of Birth	
Dependent Student's Family Information List below the people in your parent(s)' househo parent(s)' other children if your parent(s) will prov required to provide parental information if they w with your parent(s). (3) Other people if they now than half of their support through June 30, 2019.	ide more tha ere completi	n half of their suppo ng a FAFSA for 2018-	rt from July 1, 2018, t -2019. Include childre	hrough June 30, 2019, or en who meet either of the	if the other children would be ese standards, even if they do not live
Include the name of the college for any household program at a postsecondary educational institutio student's name and HU Student ID# at the top.		=	•	· · · · · · · · · · · · · · · · · · ·	= :
FULL NAME	AGE	RELATIONSHIP		COLLEGE	ENROLLED AT LEAST ½ TIM
		Self			
Dependent Student's Income Information to					
STUDENT SECTION (Check ONE box only)			PARENT SECTION (Check ONE box only)		
I have use the IRS Data Retrieval Tool to transfer 2016 IRS income tax information into FAFSA.			I have use the IRS Data Retrieval Tool to retrieve and transfer 2016 2016 IRS income tax information into FAFSA.		
I am unable to or will not use the IRS Data Retrieval Tool to			☐ I am unable to or will not use the IRS Data Retrieval Tool to		
transfer 2016 IRS income tax information into FAFSA. Please			transfer 2016 IRS income tax information into FAFSA. Please attach your 2016 IRS Tax Return Transcripts.		
attach your 2016 IRS Tax Return Transcripts. I am not required to file and I will not file IRS Federal Income			I am not required to file and I will not file IRS Federal Income		
taxes for 2016. Attach the Non-tax Filer form the Forms page of our website AND the Verification of Non-filing Letter obtained from www.irs.gov			taxes for 2016. Attach the Non-tax Filer form the Forms page of our website AND the Verification of Non-filing Letter obtained from www.irs.gov		
Certifications and Signatures			IG: If you purposel	ly give false or mislea neet, you may be fine	_
Each person signing this worksheet certifies that a	ll of the infor	mation reported on	it is complete and cor	rect.	
Student's Signature (Required)			Date		_