

SSN: _____

Please complete this verification only if you have been requested to do so by the DBU Office of Financial Aid. Complete and submit to our office as soon as possible so that your financial aid will not be delayed. Your financial aid cannot be posted until this form has been processed.

Your 2017-2018 *Free Application for Federal Student Aid (FAFSA)* was selected for review in a process called "Verification." In this process, the school will be comparing information from your application against data received from the Internal Revenue Service (IRS) based on your and your parents' 2015 IRS Transcript, W-2 forms, or other financial documents. The law says we have the right to ask you for this information before awarding federal financial aid. If there are differences between your application information and your financial documents, the school may need to make corrections electronically to your FAFSA application.

What you should do:

1. Access your FAFSA online and utilize the IRS Data Retrieval tab at the top of the page within the Financial Information section, then submit your corrected FAFSA to DBU. If you use the Data Retrieval tool, please disregard Step 2.
2. Collect your and your parents' financial documents. Request an IRS Transcript from 800-908-9946 or online at <https://sa1.www4.irs.gov/irfof-tra/start.do>. Please provide copies of W-2 forms, 1099 forms, etc.
3. Complete and **sign** this worksheet.
4. Submit the completed worksheet, 2015 IRS Transcripts, and any other documents to the DBU financial aid office.

Please follow directions carefully and call our office if you have questions about completing this worksheet.

A. Dependent Student Information (fill out completely)

Last Name	First Name	Middle Initial	Student ID
Address	Apt. #	Date of Birth	Alternative Phone Number
City	State	Zip	Phone Number
			Email Address

B. Family Information

List below the people in **your** household, including:

- Yourself **and** your parents, and
- Your parent's children, **if** your parents will provide more than half of their support from July 1, 2017 through June 30, 2018, even if they do not live with you, **and**;
- Other people, if they now live with your parents and your parents provide more than half of their support **and will continue to provide more than half of their support** through June 30, 2018.

Write the names of **all household members** in the space(s) below. Also write in the name of the college for any household member, **excluding your parent(s)** who will be attending at least half time between July 1, 2017 and June 30, 2018, and will be enrolled in a degree, diploma, or certificate program at a post-secondary educational institution. If you need more space, attach a separate page.

Full Name	Age	Relationship	College for 2017-2018*
Student's Name		Self	Dallas Baptist University
* Indicate others in college only if they will attend at least half time in 2017-2018 and in a program that leads to a college degree, diploma, or certificate.			

Verification-Dependent Student

17/18

Student Name: _____ Student ID: _____

SSN: _____

C. NON TAX FILER

I (we) did not file and are not required to file a 2015 federal income tax return: Student Parent(s)

If you or your parents did not file and are not required to file a 2015 federal income tax return, list below your and your parent(s) employer(s) and income received in 2015 (use the W-2 form or other earnings statements if available).

List below your and your parent(s) employer(s) and amount of untaxed **EARNINGS** received in 2015.

***If you did not file and were not required to file a 2015 federal income tax return, but had earnings, please provide your 2015 W-2 form to our office.** W-2 Forms attached: Student Parent(s)

Student's Income Source(s)	2015 Amounts	Parent(s) Income Source(s)	2015 Amounts
	\$		\$
	+		+
TOTAL for Student :	=	TOTAL for Parent(s) :	=

D. 2015 Additional Financial Information

Student		Parent(s)
\$	Education credits (American Opportunity, Hope or Lifetime learning tax credits) from IRS Form 1040-line 50 or 1040A-line 33 or IRS Tax Return Transcripts (Education Credits Per Computer).	\$
	Child Support paid because of divorce or separation or as a result of a legal requirement. Do not include support for children in your or your spouse's household, as reported in question 93. * Recipient Name _____ Payor Name _____ Child Name _____	
\$*		\$*
\$	Student Total	Parent(s) Total \$

E. 2015 Untaxed Income

Student		Parent(s)
\$	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 or on the Tax Return Transcripts (IRA Deduction per Computer).	\$
\$	Tax exempt interest income from IRS Form 1040-line 8b, 1040A-line 8b, or Tax Return Transcript (Tax Exempt Interest)	\$
\$	Untaxed portions of IRA distributions from IRS Form 1040-lines (15a minus 15b), 1040A-lines (11a minus 11b), or IRS Tax Return Transcript (Total IRA Distributions minus Taxable IRA Distributions). Exclude rollovers. If negative, enter a zero here.	\$
\$	Untaxed portions of pensions from IRS Form 1040-lines (16a minus 16b), or 1040A-lines (12a minus 12b), or Tax Return Transcript (Total Pensions and Annuities minus Taxable Pension/Annuity amount). Exclude rollovers. If negative, enter a zero here.	\$
\$	Student Total	Parent(s) Total \$

F. Certification Statement

I certify that all of the information provided on this form is complete and accurate. I understand that if I purposely provide false or misleading information I may be fined, sent to prison, or both.

Student Signature Date Parent Signature (At least one parent must sign.) Date

Verification-Dependent Student

17/18

Return this form to with any attachments to:

**Office of Financial Aid - Dallas Baptist University - 3000 Mountain Creek Pkwy - Dallas, TX 75211
Please scan, attach, and email to finaid@dbu.edu or fax (214)-333-5586.**