

INDEPENDENT VERIFICATION WORKSHEET (V6) 2016 – 2017

HOUSEHOLD RESOURCES VERIFICATION

Your application for financial aid was selected for review in a process called "Verification". Please submit the documentation as soon as possible but no later than 120 days after your last day of enrollment, or by September 2017, whichever occurs first. No funds will be disbursed until the verification process is completed. Failure to complete the verification process by the deadline will result in your ineligibility for Title IV funds for the award year. The law states we have the right to ask you for this information before awarding any federal aid. If there are differences between the information supplied on your federal application and your financial documents, we will need to correct this information. We must review the required information under the financial aid program rules (34 CFR, Part 668).

The Department of Education has requested that the institution verify certain items for a student selected for this review. All of the verification items are listed on this Worksheet and must be verified to determine Title IV eligibility.

To review the status of your awards, please visit your GCU Student Portal at http://mv.gcu.edu.

** The 2015 IRS Tax Transcript will not be necessary if you and/or your spouse were able to retrieve your tax information using the IRS Data Retrieval Tool when completing the 2016-2017 FAFSA and no changes were made after the information was retrieved.

Regardless if you used the IRS Data Retrieval Tool, <u>W-2s are required</u> from all household members including you and your spouse from all employers.

All fields are required to be completed. If you have any questions, please contact your GCU Student Services Advisor.

A. Student Information

STUDENT NAME:			GCU STUDENT NUMBER:
Address:			Date of Birth:
City:	State:	Zip:	Phone No.:
B. Family Information			

List the people in your household. Include:

- Yourself
- Your spouse (if married)
- Your children, if any, if you will provide more than half of their support from July 1, 2016 through June 30, 2017, even if they do not live with you. If your child is between the ages of birth and one year, please list the age as "1"
- Any unborn child who is scheduled to be born between July 1, 2016 through June 30, 2017 should be listed with an age of "0" with the relationship noted as "unborn child"
- Other people if they lived with you and received more than half their support from you and will continue to receive more than half their support from you through June 30, 2017

Full Name	Age	Relationship	Full Name of College (No Acronyms)*
		Self	Grand Canyon University

^{*}Siblings must be enrolled at least half time as a 'regular' student in a degree/certificate granting program between July 1, 2016 and June 30, 2017.

C. :	Source of Income – Student: C	OMPLETE EITHER SI	ECTION 1 OR SECTION 2
the form info	tool, go to <u>FAFSA.gov</u> , log into your FAFS. n. From there, follow the instructions to	SA record, select "Make FAI o determine if you are elig three weeks for IRS income	trieval Tool that is part of FAFSA on the Web. If you have not already used FSA Corrections," and navigate to the Financial Information section of the gible to use the IRS Data Retrieval Tool to transfer 2015 IRS income tax is information to be available for the IRS Data Retrieval Tool for electronic is.
1.	Student: Tax Filer Check the box that applies:		
	I <u>have used</u> the IRS Data Retrieval Too	when making a correction	retrieve and transfer 2015 IRS income information into my 2016-2017 to the FAFSA. <i>GCU will use the IRS information that was transferred in the</i>
			FSA on the Web to retrieve and transfer 2015 IRS income information into structions on how to use the IRS Data Retrieval Tool. W-2s are required
	transcript - <i>NOT a photocopy of the inc</i> and click on "Get a Tax Transcript by N Security Number, date of birth, and the was filed). Make sure to request the information to be available for electronic Check here if your IRS tax re	come tax return. To obtain Mail" under "Tools" then we address on file with the "Return Transcript" and ic filers and up to eight we eturn transcript(s) is attach return transcript(s) will be	FAFSA on the Web, and will submit to the school a 2015 IRS tax return in an IRS tax return transcript, call 1-800-908-9946 or go to www.IRS.gov click on the "Get Transcript by MAIL" button. You will need your Social IRS (normally this will be the address used when the 2015 IRS tax return not the "Account Transcript." It takes up to three weeks for income teks for paper filers. W-2s are required from all employers. The dot this worksheet is submitted to GCU later. Verification cannot be completed until the IRS
2.	Student: Non-Tax Filer Complete	this section if C.1 above (did not apply and you will not file and were not required to file a 2015
_	income tax return with the IRS.	-	
	I was employed in 2015 but was not req from each employer in 2015. W-2s are	quired to file a tax return. required from all employe	Listed below are the names of all my employers and the amount earned
		1	
	Student's Source of Income	2015 Amount	W-2 Attached? If not, why?
	_	\$	+
		\$	
		\$	
D.	Source of Income – Spouse: CC	OMPLETE EITHER SE	ECTION 1 OR SECTION 2
1.	Spouse: Tax Filer		
	Check the box that applies:		
		nen making a correction to	o retrieve and transfer 2015 IRS income information into my 2016-2017 of the FAFSA. GCU will use the IRS information that was transferred in
	I <u>have not yet filed</u> but will use the IRS	Data Retrieval Tool in FA	FSA on the Web to retrieve and transfer 2015 IRS income information into structions on how to use the IRS Data Retrieval Tool.
	I <u>am unable or choose not to use</u> the I transcript - <i>NOT a photocopy of the inc</i> and click on "Get a Tax Transcript by N	come tax return . To obtail Mail" under "Tools" then	FAFSA on the Web, and will submit to the school a 2015 IRS tax return n an IRS tax return transcript, call 1-800-908-9946 or go to www.IRS.gov click on the "Get Transcript by MAIL" button. You will need your Social IRS (normally this will be the address used when the 2015 IRS tax return

GCU STUDENT NUMBER: ____

STUDENT NAME: ___

was filed). Make sure to request the "Return Transcript" and not the "Account Transcript." It takes up to three weeks for income

☐ Check here if your IRS tax return transcript(s) will be submitted to GCU later. Verification cannot be completed until the IRS

information to be available for electronic filers and up to eight weeks for paper filers. W-2s are required from all employers.

 \square Check here if your IRS tax return transcript(s) is attached to this worksheet

tax return transcript(s) has been submitted to GCU.

use: Non-Tax Filer Complete				
	this section if D.1 above did not apply a	nd you will not file and were not required	to file a 20	15 income tax
rn with the IRS.				
I was not employed and had n	o income earned from work in 2015, OF	₹		
		isted below are the names of all my em	ployers an	d the amount
earned from each employer in	2015. W-2s are required from all emp	loyers.		
NOT leave the section below b	lank. Enter "none" if you did not earn i	ncome in 2015 or enter the amount of in	come earne	ed during 2015
Spouse's Source of Income	2015 Amount	W-2 Attached? If n	ot, why?	
.,	\$	···· •	- , ,·	
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			
ease indicate below if someone	Assistance Program (SNAP) in the household (listed in Section B) restamps) any time during the 2014 or 20	ceived benefits from the Supplemental N 15 calendar years.	lutrition Ass	sistance Program
ease indicate below if someone SNAP (formerly known as food At least one of the persons list	in the household (listed in Section B) restamps) any time during the 2014 or 20 ted in Section B of this worksheet received.	red SNAP Benefits in 2014 or 2015.	lutrition Ass	sistance Program
ease indicate below if someone SNAP (formerly known as food At least one of the persons list	in the household (listed in Section B) restamps) any time during the 2014 or 20 ted in Section B of this worksheet received.	15 calendar years.	lutrition Ass	sistance Program
ease indicate below if someone SNAP (formerly known as food At least one of the persons list	in the household (listed in Section B) restamps) any time during the 2014 or 20 ted in Section B of this worksheet received.	red SNAP Benefits in 2014 or 2015.	lutrition Ass	sistance Program
ease indicate below if someone SNAP (formerly known as food At least one of the persons list None of the household memb	in the household (listed in Section B) restamps) any time during the 2014 or 20 ted in Section B of this worksheet received.	red SNAP Benefits in 2014 or 2015. received SNAP Benefits in 2014 or 2015.	lutrition Ass	sistance Program
ease indicate below if someone SNAP (formerly known as food At least one of the persons list None of the household memb	in the household (listed in Section B) restamps) any time during the 2014 or 20 ted in Section B of this worksheet received OR ers listed in Section B of this worksheet and/or spouse paid child support in 2015 child support in 2015.	red SNAP Benefits in 2014 or 2015. received SNAP Benefits in 2014 or 2015.	lutrition Ass	sistance Program
ease indicate below if someone SNAP (formerly known as food At least one of the persons list None of the household member Child Support Paid ease indicate below if student a Neither I nor my spouse paid I and/or my spouse listed in Spaid the child support, to who	in the household (listed in Section B) restamps) any time during the 2014 or 20 ted in Section B of this worksheet received OR ers listed in Section B of this worksheet and/or spouse paid child support in 2015. OR ection B of this worksheet paid child sum the child support was paid, the name that was paid in 2015 for each child. No	red SNAP Benefits in 2014 or 2015. received SNAP Benefits in 2014 or 2015.	name of th	ne person who paid, and the tota

	NAME:		GCU STUDENT N	UMBER:
he	r Untaxed Income for 2015			
	response is requested, if any item does no	t apply, enter "N/A	" for Not Applicable or e	nter \$0 in an area where an <u>amount</u> is
e st	pace is needed, provide a separate page w	ith your name and	GCU Student Number at	the top of the page.
	Payment to tax-deferred pension List any payments (direct or withheld from 403(b) plans), including, but not limited to G, H, and S.	n earnings) to tax-d	leferred pension and reti	
	Full Name of Person Who Made the	Payment	Total A	Amount Paid in 2015
_				TOTAL:
	Child support received List the actual amount of any type of child Do not include foster care payments, ado			
-	Full Name of Adult Who Received the Support		ild for Whom Support s Received	Amount of Child Support Received in 2015
_				TOTAL:
	Housing, food, and other living all Include cash payments and/or the cash va value of a basic military allowance for hou	lue of benefits rece		
-	Full Name of Recipient	Туре о	f Benefit Received	Amount of Benefit Received in 2015
				TOTAL:
	Veterans non-education benefits List the total amount of veterans non-edu Indemnity Compensation (DIC), and/or VA	Educational Work	-Study allowances. Do no	
	benefits such as. Montgomery of bill, bep			
	Full Name of Recipient		ns Non-educational fit Received	Amount of Benefit Received in 2015

List the amount of other untaxed income List the amount of other untaxed income not reported and not included elsewhere on this form. Include untaxed income such as cash earned from work that was not reported on taxes, worker's compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc. Do not include any income items reported in Sections C and D of this form or in items 1-4 of Section F above. In addition, if you have student aid, federal & state tax refunds, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SI), WorkforceInvestment Act (WA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels, these will be reported on items 7 and 8 below. Full Name of Recipient Type of Other Untaxed Income Amount of Other Untaxed Income Received in 2015 Money received or paid on behalf of the household List any money received or paid on the student's behalf (e.g., payment of student's bills) and not reported elsewhere on the form. Enter the total amount of cash support the household received in 2015. Include support from a parent who information was not reported on the student's 2016-2017 FAFSA. If someone is paying rent, utility bills, etc., for thousehold or gives cash, gift cards, etc., include the amount of that person's contributions. Amounts paid on the household's behalf also include any distributions to the student from a 529 plan owned by someon other than the student or the student's parents, such as grandparents, aunts, and uncles of the student. Purpose: e.g., Cosh, Rent, Books Source Amount Received in 2015 TOTAL: Federal Means-tested Public Benefits Programs List any type of support received by household members from the Means-tested Federal Benefits Program including Tempor. Assistance to Needy Families (TANF); Supplemental Nutrito				
addition, if you have student aid, federal & state tax refunds, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels, these will be reported on items 7 and 8 below. Full Name of Recipient Type of Other Untaxed Income Amount of Other Untaxed Income Received in 2015	•	List the amount of other untaxed income such as cash earned from work that was n	ot reported on taxes, worker's compensation	on, disability, Black Lung Benefits,
TOTAL: Money received or paid on behalf of the household		addition, if you have student aid, federal & Social Security benefits, Supplemental Secombat pay, benefits from flexible spending	& state tax refunds, Temporary Assistance t curity Income (SSI), WorkforceInvestment A ng arrangements (e.g., cafeteria plans), fore	o Needy Families (TANF), untaxed ct (WIA) educational benefits,
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List any type of support received by household members from the Means-tested Federal Benefits Program including Tempora Assistance to Needy Families (TANF); Supplemental Nutrition Assistance Program (SNAP); Supplementary Security Income (SS Free or Reduced Price School Lunch; and/or Women, Infants, and Children (WIC). Program from which Support was Received (e.g. SNAP, TANF, WIC) Support Received in 2015		Purpose: e.a., Cash, Rent, Books	Source	Amount Received in 2015
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Full Name of Recipient Received (e.g. SNAP, TANF, WIC) Support Received in 2015		· u.pecci cigy carry newy zecone		
	•	Federal Means-tested Public Bene List any type of support received by house Assistance to Needy Families (TANF); Supp	shold members from the Means-tested Fede Dlemental Nutrition Assistance Program (SN	TOTAL:eral Benefits Program including Tempora
TOTAL:	•	Federal Means-tested Public Bene List any type of support received by house Assistance to Needy Families (TANF); Supp Free or Reduced Price School Lunch; and/o	chold members from the Means-tested Fede olemental Nutrition Assistance Program (SN or Women, Infants, and Children (WIC). Program from which Support was	TOTAL: eral Benefits Program including Tempora AP); Supplementary Security Income (SS **Amount of Financial**
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8.	Additional resources		
	benefits, and other amounts received by that were not required to be reported or stipends that will be used for living exper received, federal veterans education ben Workforce Investment Act (WIA) educatic cafeteria plans), foreign income exclusion type of disability benefit (e.g. "SSD" for S	tily's financial situation, please provide belothe student and any members of the student the FAFSA or other forms submitted to the ses, Section 8 housing, alimony, foster care efits, military housing, federal & state tax ronal benefits, combat pay, benefits from floor, credit for federal tax on special fuels, etcocial Security Disability).	ent's household. This may include items e financial aid office, such as financial aid e payments received, adoption payments refunds, untaxed Social Security benefits, exible spending arrangements (e.g., . If disability is reported, please note the
	ii more space is needed, provide a separa	ate page with your Name and GCO Student	Amount of Financial
	Full Name of Recipient	Type of Financial Support	Support Received in 2015
			TOTAL:
		TOTAL OF ITE	MS 1-8 IN SECTION F :
	Comments:	Note: The automatic calculation abov	e will not include additional income/resources reported eparate page is used, please manually update the sum.
Certi	ification and Signature (Handwri	tten Signature Required – Typed/E	Electronic Signature Not Accepted)
		tten Signature Required – Typed/E	
gning		information reported is complete and corre	

STUDENT NAME: _____ GCU STUDENT NUMBER: _____