

# WILLIAM PENN UNIVERSITY

## 2017-18 DEPENDENT VERIFICATION WORKSHEET

Your 2017-18 Free Application for Federal Student Aid ( FAFSA ) was selected for review in a process called verification. To verify that you provided correct information, William Penn University will compare your FAFSA with the information on this worksheet and any other required documents. If there are differences, your FAFSA information may need to be corrected. William Penn will make the corrections on your behalf.

You and your parent must complete and sign this worksheet, attach required documents, and submit to William Penn University. William Penn University may request additional information once the review process begins. If you have questions about verification, contact Ann Johnson at 800-779-7366 option 2 or 641-673-1184.

Send documentation by:

**MAIL:**

William Penn University  
Office of Financial Aid  
201 Trueblood Avenue  
Oskaloosa , IA 52577  
OR

**FAX:**

641-673-1115

OR

**EMAIL:**

johnsona@wmpenn.edu

### A. Student Information – Please Print

\_\_\_\_\_  
Last Name                      First Name                      M.I.

\_\_\_\_\_  
Social Security Number (Optional)

\_\_\_\_\_  
Address (include apt. #)

\_\_\_\_\_  
City                                      State                                      Zip Code

\_\_\_\_\_  
Date of Birth                      E-mail Address

\_\_\_\_\_  
Daytime Phone Number and /or Cell Number (Include Area Code)

### B. Family Information

Dependent Students: List the people in your parent’s household; include (1) yourself, (2) - (3) your parent(s) you live with (include step-parent); (4) - (5) your parent’s other children, even if they don’t live with your parent(s), if your parents will provide more than half of their support from July 1, 2017 through June 30, 2018 or if they would be required to provide parental information when applying for federal student aid; and (6) any other people if they now live with your parent(s), and your parent(s) will provide more than half of their support from July 1, 2017 through June 30, 2018.

Also write the name of the college for any family member excluding your parent(s), who will be attending college half time between July 1, 2017 and June 30, 2018 and will be enrolled in a degree diploma or certificate program.

Full Name	Age	Relationship	College	Will be enrolled at least half time. (yes or no)
1.		Student/Self		
2.		Parent 1 mother,father,stepparent		
3.		Parent 2 mother,father,stepparent		
4.		Sibling		
5.		Sibling		
6.		Other Describe Relationship		

## C. Tax Forms and Income Information

**TAX FILERS:** Check the line for those people who filed a 2015 Federal Income Tax Return.

\_\_\_\_ Student      \_\_\_\_ Parent 1 (mother, father, stepparent)      \_\_\_\_ Parent 2 (mother, father, stepparent)

**IF YOUR VERIFICATION LETTER IS REQUESTING A TAX RETURN TRANSCRIPT , the income tax information must come directly from the IRS. The attached instruction sheet gives a couple of options for obtaining the tax information.**

**NON TAX FILERS:** Check the line for those people who did not and are not required to file a 2015 Federal Income Tax Return.

\_\_\_\_ Student      \_\_\_\_ Parent 1 (mother, father, stepparent)      \_\_\_\_ Parent 2 (mother, father, stepparent)

For the individuals who DID NOT AND ARE NOT REQUIRED to file a 2015 income tax return you must:

1. List below your employer(s) and any income received in 2015 in the box provided below.
2. Submit copies of all 2015 W2s to the Financial Aid Office.
3. Submit a confirmation of non-filing to the financial aid office by completing IRS Form 4506-T. Be sure to check box 7 on the 4506-T to request the confirmation of non-filing, then mail or fax the 4506-T by following instructions on Page 2 of the 4506-T Form. You may obtain a 4506-T Form at the IRS website: [www.irs.gov](http://www.irs.gov).

Name of Employer	Student Amount	Receive W2 (yes/no)	Parent Amount	Receive W2 (yes/no)
<i>Suzy's Auto Body Shop (example)</i>	\$2000.00	Yes		

## F. Certification and Signature

By signing this worksheet, I certify that all the information reported on this worksheet is complete and correct.

**Warning:** If you purposely give false or misleading information, you may be fined, be sentenced to jail, or both.

\_\_\_\_\_  
Student's Name (Print Name)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date