



Northeastern Illinois University Student Financial Wellness

5500 North Saint Louis Avenue • D Building Room 200 • Chicago, IL 60625-4699 • 773-442-5016 • Fax: 773-442-5040
Financial-aid@neiu.edu • neiu.edu/financial-aid • Check your financial aid status at neiuport.neiu.edu

2018-2019 Verification Worksheet – Independent Student

Student's First Name	<input type="text"/>	6-digit NEIU Student ID#	<input type="text"/>
Student's Last Name	<input type="text"/>	Phone Number	<input type="text"/>

A. Independent Student's Family Information

List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2018, through June 30, 2019, or if the child would be required to provide your information if they were completing a FAFSA for 2018-2019. 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, 2019.

Include the name of the college for any household member who will be enrolled at least half time, in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2018, and June 30, 2019. *If more space is needed, attach a separate page with your name and NEIU ID at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
		<i>Self</i>	<i>Northeastern Illinois University</i>	

Complete this section if the student **RECEIVED VETERANS NON-EDUCATION BENEFITS** in 2016.

Name of Person Who Received Benefits	Type of Benefit Received	Amount of Benefit Received in 2016



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Student's Name: _____ NEIU ID: _____

B. Independent Student's Income Information to Be Verified

1. TAX RETURN FILERS— Instructions: Complete this section if you, the student, filed or will file a 2016 income tax with the IRS. *The best way to verify income is by using the IRS Data Retrieval Tool that is part of FAFSA on the Web. If the student has not already used the tool, go to FAFSA.gov, log in to the student's FAFSA record, select "Make FAFSA Corrections," and navigate to the income section of the application. From there, follow the instructions to determine if the student is eligible to use the IRS Data Retrieval Tool to transfer 2016 IRS income tax information into the student's FAFSA. The tax filing status should reflect 'Already Filed.'*

Check the box that applies:

- I, the student has used the IRS Data Retrieval Tool in *FAFSA on the Web* to transfer 2016 IRS income tax return information into the student's FAFSA, either on the initial FAFSA or when making a correction to the FAFSA.
- I, the student is unable or chooses not to use the IRS Data Retrieval Tool in *FAFSA on the Web*, and instead will provide the school with a **2016 IRS Tax Return Transcript and W-2 form(s)** —not a photocopy of the income tax return. *To obtain an IRS Tax Return Transcript, go to www.irs.gov/Individuals/Get-Transcript and click on the "Get Transcript Online or by Mail." Make sure to request the "IRS tax return transcript" and not the "IRS tax account transcript."*
- Check here if the student's IRS Tax Return Transcript and W-2 form(s) are attached to this worksheet. **Important Note:** Verification cannot be completed without these documents.*
- A copy of IRS Form 4868, "Application for automatic Extension of time to File U.S. Individual Income Tax Return" is attached.
- For "Amended U.S. Individual Income Tax Returns" provide the 2016 IRS Form 1040X, Original IRS Tax Transcript **AND** the IRS Tax Account Transcript with amendments
- For victims of IRS identity theft, provide an IRS Tax Return Database View (TRDBV) Transcript **AND** a signed, dated statement indicating that you were victim of IRS tax-related identity theft and that the IRS has been made aware. *To obtain a printout of this documentation, contact IRS at 1-800-908-4490.*
- A copy of a 2016 Foreign Tax Return with any foreign monies **converted to U.S. dollars is attached.**

2. NON-TAX FILERS—Instructions: Complete this section if the student, **will not file and is not required** to file a 2016 income tax return with the IRS. **You are required to submit an IRS Non Filer Statement regardless of the amount of earnings during 2016.**

Check the box that applies:

- A copy of your 2016 IRS Non Tax filing Statement (issued after October 1, 2017) is attached.
- I, the student was not employed, had no income earned from work in 2016 and have requested the Non Tax filing statement using the 4506T.
- I, the student was employed in 2016 and have listed all employers below, the amount earned from each employer in 2016 and whether W-2 form(s) are attached. *List every employer even if they did not issue a W-2 form.*

Employer's Name	2016 Amount Earned	W-2 Attached?
<i>Gonzalez's Auto Body Shop (example)</i>	<i>\$2,000.00</i>	<i>Yes</i>



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C. Independent Student's Other Information to Be Verified

1. Complete this section if someone in the student's household (listed in Section A) **RECEIVED BENEFITS FROM the Supplemental Nutrition Assistance Program or SNAP** (formerly known as food stamps) any time during the 2015 or 2016 calendar years.

One of the persons listed in Section B of this worksheet received SNAP benefits in 2015 or 2016. If asked by the student's school, I will provide documentation of the receipt of SNAP benefits during 2015 and/or 2016.

2. Complete this section if one of the student's **RECEIVED HOUSING OR OTHER LIVING ALLOWANCES** as a member of military or clergy in 2016.

Name of Person Who Received Benefit	Type of Benefit Received	Amount of Benefit Received in 2016

3. Complete this section if one of the student's household members **RECEIVED CHILD SUPPORT** in 2016.

Name of Person Who Received Child Support	Name of Child for Whom Support Was Received	Amount of Child Support Received in 2016

1. Complete this section if your **2016 TOTAL HOUSEHOLD INCOME falls below \$16,020. MUST BE >ZERO.**

Type of Help	Who is the Provider (relationship to the parent, e.g. friend, relative)	Amount Received in 2016
Cash		
Rent		
Utilities		
Gas (for car)		
Food		
Books		
Social Security Benefits		
Other:		

D. Certification and Signature

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married, the spouse's signature is optional.

Student's Signature

Date

Spouse's Signature

Date

**Do not mail this worksheet to the U.S. Department of Education.
Submit this worksheet to Financial Aid, Scholarship and Student Employment Services.
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