2019-2020 Independent Verification Worksheet
Federal Student Aid Programs

Your 2019–2020 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 reported on your FAFSA. To verify that you provided correct information the financial aid office at Molloy College 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 must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid office at Molloy College. Molloy College may ask for additional information. If you have questions about verification, contact your financial aid office as soon as possible so that your financial aid will not be delayed.

A. Independent Student’s Information

<table>
<thead>
<tr>
<th>Student’s Last Name</th>
<th>Student’s First Name</th>
<th>Student’s M.I.</th>
<th>Student’s Social Security Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Student’s Street Address (include apt. no.)</th>
<th>Student’s Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Phone number (include area code)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B. 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, 2019, through June 30, 2020, or if the child would be required to provide your information if they were completing a FAFSA for 2019–2020. 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, 2020.

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, 2019, and June 30, 2020. If more space is needed, attach a separate page with your name and Social Security Number at the top.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship</th>
<th>College</th>
<th>Will be Enrolled at Least Half Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marty Jones(example)</td>
<td>28</td>
<td>Wife</td>
<td>Central University</td>
<td>Yes or No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Self</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Independent

Student Name __________________________________________ SSN ____________________________

C. Independent Student’s Income Information to Be Verified

☐ Check here if the student/spouse (if married) 2017 IRS tax return transcript(s) is attached to this worksheet.

☐ Check here if you used the IRS Data Retrieval Tool on the FAFSA

TAX RETURN NONFILERS—Complete this section if you, the student (and, if married, your spouse), will not file and are not required to file a 2017 income tax return with the IRS.

Check the box that applies:

☐ The student (and, if married, the student’s spouse) was not employed and had no income earned from work in 2017.

☐ The student (and/or the student’s spouse if married) was employed in 2017, list below the names of all employers, the amount earned from each employer in 2017. Attach copies of all 2017 W-2 forms issued to you (and, if married, to your spouse) by employers. List every employer even if the employer did not issue a W-2 form. If more space is needed, attach a separate page with your name and SSN at the top.

<table>
<thead>
<tr>
<th>Employer’s Name</th>
<th>2017 Amount Earned</th>
<th>W-2 Attached?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suzy’s Auto Body Shop (example)</td>
<td>$2,000.00</td>
<td>Yes</td>
</tr>
</tbody>
</table>

D. Verification of Untaxed Income for 2017

(If any item does not apply, enter “N/A” for Not Applicable or enter 0 where a response is requested).

☐ Educational Credits

$___________  ____________

(American Opportunity Tax Credit and Lifetime Learning Credit) from IRS Form 1040-line 50 or 1040A-line 33).

☐ 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).

☐ Untaxed Pensions

$___________  ____________

(From IRS Form 1040-lines (16a minus 16b) or 1040A-lines (12a minus 12b). Excludes rollovers. If negative, enter a zero here).

☐ Untaxed IRA distributions

$___________  ____________

(From IRS Form 1040-lines (15a minus 15b) or 1040A-lines (11a minus 11b). Excludes rollovers. If negative, enter a zero here).
Independent

Student Name ____________________________  SSN ____________________________

Section D Continues…

Verification of Untaxed Income for 2017
(If any item does not apply, enter “N/A” for Not Applicable or enter 0 where a response is requested).

☐ Tax exempt interest income $___________  ___________
   From IRS Form 1040-line 8b or 1040A-line 8b).

☐ Other 2017 untaxed income $___________  ___________
   (List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc. Do not include, additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA), combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels).

E. 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 (required)  Date

_____________________________________________
Spouse’s Signature (optional)  Date

Do not mail this worksheet to the U.S. Department of Education. 
Submit this worksheet to the financial aid office

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.