

2018-2019 Institutional Verification Form

Student's Name _____ Phone _____

Student ID _____ Regis E-Mail _____

SECTION A: HOUSEHOLD SIZE

If **dependent**, list the people in your household, including:

- **Yourself** (as the 'Student');
- **Your parent(s)**;
- **Your parents' other children**, even if they don't live with your parent(s), if (a) your parents will provide *more than half* of their financial support from July 1, 2018, through June 30, 2019, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and;
- **Other people** if they *live with your parent(s)*, and your parent(s) provide *more than half* of their financial support and will continue to provide more than half of their support from July 1, 2018, through June 30, 2019.

If **independent**, list the people in your household, including:

- **Yourself** (as the 'Student'), and **your spouse** if you were married at the time the FAFSA was completed and;
- **Your dependent children**, if you will provide *more than half* of their financial support from July 1, 2018, through June 30, 2019.
- **Other people** if they *live with you* and you provide *more than half* of their financial support and will continue to provide more than half of their support from July 1, 2018, through June 30, 2019.

** Include the name of the college for any household member who will be attending college at least half-time between July 1, 2018, and June 30, 2019, and will be enrolled in a degree, diploma, or certificate program (dependent students should NOT include a college for your parents).*

| Name | Age | Relationship to Student | College/University (if applicable) |
|------|-----|-------------------------|------------------------------------|
| 1. | | Self | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |
| 7. | | | |

Check here if there are more than seven family members and attach a list of these people to this form.

SECTION B: NON-FILERS

Student (and Spouse, if applicable) Check this box if you are **not** filing a 2016 Federal Tax Return.

I/We will not file and are not required to file a 2016 Federal Income Tax return. ****Please see Section C****

Student's Parent(s) Check this box if your parents were included on your FAFSA and will **not** file a 2016 Federal Tax Return.

I/We will not file and are not required to file a 2016 Federal Income Tax return. ****Please see Section C****

****ALL NON-FILERS MUST COMPLETE SECTION C ON NEXT PAGE****

SECTION C: NON-FILERS

If you or your parent(s) did not file a 2016 tax return, **you must provide the following information:**

- 1) Documentation from the IRS dated on or after October 1, 2017 that indicates a 2016 IRS income tax return was not filed with the IRS. This is required for each individual non-filer (if student or parents are married, each person must submit a separate non-filer document). *Dependent students who did not file a tax return are excluded from this requirement.* To obtain this document, go to www.regis.edu/faforms choose the "2018-2019 Forms" tab and click **IRS Non-Filer Documentation.**
- 2) Complete the following information if you are a student or parent who is not filing a 2016 Federal Income Tax return but had earnings from work in 2016. **You must also provide a copy of any/all 2016 W-2(s) or other earnings statement.**

| | | |
|-------------------------|----------------|---------------------|
| Name of Non-Filer _____ | Employer _____ | 2016 Earnings _____ |
| Name of Non-Filer _____ | Employer _____ | 2016 Earnings _____ |

SECTION D: CHILD SUPPORT PAID – As reported on question 44 and 93 of the 2018-2019 FAFSA

| Child Support Paid – 2016 Total Amount | Parents or Spouse | Student |
|---|-------------------|---------|
| Child support paid. <u>DO NOT</u> include support for children in your parents' household (Section A). | \$ | \$ |
| Name of the person who paid the child support: | | |
| <u>NAME</u> of each child for whom child support was paid: | | |

SECTION E: UNTAXED INCOME – As reported on questions 45 and 94 of the 2018-2019 FAFSA

| Untaxed Income – 2016 Total Amount | Parents or Spouse | Student |
|---|-------------------|---------|
| Total child support received in 2016 for all children (excluding foster care or adoption payments) | \$ | \$ |
| Other untaxed income and benefits. List sources: | \$ | \$ |

| | Parents or Spouse | Student |
|--|-------------------|-------------|
| Did you report a ROLLOVER on your 2016 taxes as an <i>untaxed</i> IRA or Pension distribution (transfer of funds from one account to another)? | Yes___No___ | Yes___No___ |
| If yes, list the amount of the rollover included on your taxes | \$ | \$ |

I/We certify that the information on this form is complete and correct.

Student's Signature _____ Date _____ Parent's Signature (if student is dependent) _____ Date _____