



VINCENNES
UNIVERSITY

**2008-2009 Dependent
Verification Worksheet**

Financial Aid Office
Vincennes University
1002 N. First Street
Vincennes, IN 47591
Phone: 812-888-4361
Fax: 812-888-4261
E-mail: fa@vinu.edu

Student Name _____

Student ID# _____

*The FAFSA Central Processing Service has identified you for a process called verification. The VU financial aid office needs the information you supply on this worksheet and on the Worksheet A-B-C on page two of this form. **It is very important that the answers you provide below and on the Worksheet A-B-C are accurate.** We will correct any information on your FAFSA based on these answers.*

Step 1. Complete the chart below by listing the people in your parents' household:

- Yourself & your parent(s) (including stepparent) even if you don't live with them.
- Your parents' other children, even if they don't live with them, **if your parents will provide more than half of their support from July 1, 2008, through June 30, 2009**, or if the children would be required to provide parent data on the FAFSA.
- Any others for whom your parents **will provide more than half of their support** from July 1, 2008, through June 30, 2009.
- Provide a college name in the **College** column if that person will be attending half time or more. (At least 6 credits is the usual number required for half-time status.)

Family Member Full Name	Date Birth	Relationship	College (if attending half time or more)
		Self	Vincennes University

Step 2. Attached signed copies of 2007 federal tax returns you and your parent(s) filed.

If you or your parent(s) did not have to file federal taxes, indicate that below and provide total 2007 earnings.

- I will not & was not required to file a 2007 federal tax return. My 2007 earnings are listed below.
- My parents will not & were not required to file a 2007 federal tax return. Total 2007 earnings are below.

My total 2007 earnings: \$ _____ Parental total 2007 earnings: \$ _____

Sources of my earnings _____ Sources of parental earnings _____

Step 3. Complete the Worksheet A-B-C on page 2 of this form.

Step 4. By signing below, I affirm that all information above is complete and correct.

Student signature _____ Date _____

Parent signature _____ Date _____

After you turn in this form, please DO NOT make any changes to your FAFSA.



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**2008-2009 Dependent
Worksheet A-B-C**

Student Name _____

Student ID# _____

Provide total amounts for you and your spouse, if married, in 2007 for each of the categories below. If the category does not apply to you, answer with a 0 (zero) or NA. Do NOT leave any dollar amount boxes blank. Please sign below.

Student	Worksheet A	Parent(s)
\$	Welfare benefits, including Temporary Assistance for Needy Families (TANF). Do not include food stamps or subsidized housing.	\$
\$	Social Security benefits received for all household members that were not taxed, including SSI and SSD.	\$
	Worksheet B	
\$	Payments to tax-deferred pension & savings plans, including but not limited to amounts reported on the W-2 Form in boxes 12a-12d, codes D, E, F, G, H & S.	\$
\$	Child support you received for all children. Do not include foster care or adoption payments.	\$
\$	Housing, food, and other living allowances paid to members of the military, clergy, and others, including cash payments and cash value of benefits.	\$
\$	Veterans' non-education benefits such as disability, death pension, dependency & indemnity compensation, or VA educational work-study.	\$
\$	Any other untaxed income or benefits not reported above such as disability, worker compensation, and combat pay not reported on tax returns.	\$
\$	Money received or paid on your behalf not reported elsewhere on this form.	\$
	Worksheet C	
\$	Child support paid as a legal requirement for children not reported in the household.	\$
\$	Federal work-study earnings and need-based employment earnings from fellowships and assistantships.	\$
\$	Student grants, scholarships, or AmeriCorps funds reported as part of your adjusted gross income (AGI) on your tax return.	\$

By signing below, I affirm that all the information above is complete and correct.

Student signature _____ Date _____

Parent signature _____ Date _____

After you turn in this form, please DO NOT make any changes to your FAFSA.