

**Student's Name:** \_\_\_\_\_ **Student ID/SSN:** \_\_\_\_\_

In accordance with the Federal Regulations in regards to Requirements 34 CFR 668.53, your FAFSA/ISIR Application has been selected in a process called verifications. The following questions need to be verified against your **2015** IRS Income Tax Transcripts. These questions may/may not be reported on the FAFSA/ISIR Application or the FAFSA/ISIR shows an unusually low zero amounts for assets.

**Please check/complete which statement applies to your parent (s) as the date the FAFSA was signed or check not applicable.**

Taxable interest is reported on my IRS Transcripts and the value of all the accounts that generate this interest is: \$ \_\_\_\_\_

Parent: \_\_\_\_\_ Not Applicable: \_\_\_\_\_

Dividends are reported on my IRS Transcripts and the value of all accounts that generate dividends is: \$ \_\_\_\_\_

Parent: \_\_\_\_\_ Not Applicable: \_\_\_\_\_

A capital gain or loss is reported on my IRS Transcripts and the value of any assets associated with the capital gain or loss is: \$ \_\_\_\_\_

Parent: \_\_\_\_\_ Not Applicable: \_\_\_\_\_

The taxpayer who's IRS transcripts shows business income or business loss must complete the following information to determine whether or not Net Worth of Business should have been disclosed on the FAFSA. The HERA excludes the net value of a small business that you own and control and that has 100 or fewer full time equivalent employees. Please check one of the following:

- I currently own and control a small business with 100 or fewer employees
- I am an independent contractor, or I am otherwise self-employed
- I currently do NOT own a business
- Not Applicable

Explanation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The taxpayer who's IRS Transcripts shows rent/royalty/partnership/estate must select one of the following and provide an explanation regarding the following selection:

S Corporation: \_\_\_\_\_ Partnership: \_\_\_\_\_ Rental: \_\_\_\_\_ Not Applicable: \_\_\_\_\_

Explanation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that all of the information above is true and complete. I have not knowingly or intentionally provided any false statements or fraudulent documentation. I understand that if I am found to have knowingly or intentionally given false information, eligibility for aid can be jeopardized.

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

Date \_\_\_\_\_

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

Date \_\_\_\_\_