

**CUSTOM VERIFICATION WORKSHEET**

Your 2016–2017 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, we will compare your FAFSA with the information on this verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this verification worksheet, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

**A. Student’s Information**

Student’s Last Name	First Name	M.I.	Student’s Identification (ID) Number
Student’s Street Address (include apt. no.)			Student’s Date of Birth
City	State	Zip Code	Student’s Email Address
Student’s Home Phone Number (include area code)			Student’s Alternate or Cell Phone Number

**B. Dependent Student’s Family Information**

**Number of Household Members:** List below the people in the parents’ household. Include:

- The student.
- The parents (including a stepparent) even if the student doesn’t live with the parents.
- The parents’ other children if the parents will provide more than half of the children’s support from July 1, 2016, through June 30, 2017, or if the other children would be required to provide parental information if they were completing a FAFSA for 2016–2017. Include children who meet either of these standards, even if a child does not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of the other person’s support and will continue to provide more than half of their support through June 30, 2017.

**Number in College:** Include in the space below information about any household member who is, or will be, excluding the parents, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2016, and June 30, 2017, include the name of the college.

*If more space is needed, provide a separate page with the student’s name and ID number at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)
		<i>Self</i>		

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Student's Name \_\_\_\_\_

Student's ID Number \_\_\_\_\_

### C. Child Support Paid

Complete this section if one or both of the parents (listed in Section B of this worksheet) and/or the student included child support paid in 2015 on the student's 2016-2017 FAFSA.

Provide in the space below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names and ages of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2015 for each child. **If child support paid does not apply**, enter "N/A" for Not Applicable in the space provided below.

*If more space is needed, provide a separate page that includes the student's name and ID number at the top.*

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name and Age of Child for Whom Support Was Paid	Annual Amount of Child Support Paid in 2015
Total Amount of Child Support Paid			\$

Note: If we have reason to believe that the information regarding child support paid is inaccurate, we may require additional documentation, such as:

- A signed statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks, money order receipts, or similar records of electronic payments having been made.

### D. Receipt of SNAP Benefits

Indicate below if a member of the student's parents' household (listed in Section B of this worksheet), received benefits from the Supplemental Nutrition Assistance Program (SNAP) sometime during 2014 or 2015, and receipt of the benefits were reported on the student's 2016-2017 FAFSA.

- YES.** The parents certify that \_\_\_\_\_, a member of the parents' household, received benefits from the Supplemental Nutrition Assistance Program (SNAP) sometime during 2014 or 2015. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243).
- NO.** No member of the parents' household received SNAP benefits in 2014 or 2015.

Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2014 or 2015.

Student's Name \_\_\_\_\_

Student's ID Number \_\_\_\_\_

**E. Certifications and Signatures**

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

**WARNING: If you purposely give false or misleading information you may be fined, sent to prison, or both.**

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Student's ID Number

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

*Submit this worksheet to the Auburn Montgomery Office of Financial Aid  
P.O. Box 244023, Montgomery, AL 36124-4023; fax (334) 244-3913.*

*You should make a copy of this worksheet for your records.*