

**CUSTOM VERIFICATION WORKSHEET**

Your 2015–2016 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 your spouse 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. Independent Student’s Information**

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

- The student.
- The student’s spouse, if the student is married.
- The student’s or spouse’s children, if the student or spouse will provide more than half of the children’s support from July 1, 2015, through June 30, 2016, even if the children do not live with the student.
- Other people, if they now live with the student and the student or spouse provides more than half of the other people’s support and will continue to provide more than half of their support through June 30, 2016.

**Number in College:** Please include in the space below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2015, and June 30, 2016, 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 the student and/or spouse (listed in Section B of this worksheet) included child support paid in 2014 on the student's 2015-2016 FAFSA.

List 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 2014 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	Amount of Child Support Paid in 2014
Total Amount of Child Support Paid			\$

Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation, such as:

### D. Receipt of SNAP Benefits

Indicate below if a member of the student's household (listed in Section B of this worksheet), received benefits from the Supplemental Nutrition Assistance Program (SNAP) sometime during 2013 or 2014, and receipt of the benefits were reported on the student's 2015-2016 FAFSA.

**YES.** The student certifies that \_\_\_\_\_, a member of the student's household, received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2013 or 2014. 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 student's household received SNAP benefits in 2013 or 2014.

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 2013 or 2014.

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.

**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

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Date

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

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