2016—2017 V6-Household Resources Verification

Your application for federal financial aid was selected for review in a process called "Verification." In this process, we will be comparing information from your FAFSA application with your Federal tax information, W-2 forms and/or other financial documents. The law says we must ask you for this information before awarding financial aid. If there are differences between your application information and your financial documents, corrections will need to be made to your application and your information will be reprocessed.

You must complete and sign the worksheet and submit it along with any documents requested below. We cannot continue processing your financial aid application and will not award you any federal aid until verification has been completed. Contact our office if you need assistance in filling out this form at (684) 699-9155 or faid@amsamoa.edu.

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Last Name	First Name	M.I.	Student ID # or Social Security Number
Address (P.O. Box,	Village, City, State, Zip Cod	e)	Date of Birth
Email Address			Home/Cell Phone

II: FAMILY INFORMATION

DEPENDENT STUDENTS: List the people in your parents' household; include the following:

- Yourself and your parents (including stepparent), as listed on the FAFSA, even if you do not live with your parent(s)
- Your parents' other children, if (a) your parents provide more than half of their support from July 1, 2016 through June 30, 2017, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
- Other people if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2016 through June 30, 2017.

INDEPENDENT STUDENTS: List people in your household; include the following:

- Yourself and your spouse, if married,
- Your children, if you provide more than half of their support from July 1, 2016 through June 30, 2017, and
- Other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2016 to June 30, 2017.

Write the names of all family members. Also write in the names of the college for any family member, excluding your parent(s), who will be attending college at least half-time between July 1, 2016 and June 30, 2017, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)
		Self	American Samoa Community College	YES

III: <u>STUDENT'S</u> INCOME INFORMATION TO BE VERIFIED—Complete Section A, <u>OR</u> B, <u>OR</u> C.

Suzy's Auto Body Shop (example)	\$ 2,000.00	YES
Employer's Name	2015 Amount Earned	W-2/Wage Statement Attached??
☐ I, the student (and/or the student's spouse if married) was employers, the amount earned from each employer in 2015. A forms issued to you (and, if married, to your spouse) by employer — If more space is needed, attach a separate page with your top.	ttach copies of all 2014 yers. name and ID (or social	W-2/wage statement l security) number at the
I, the student (and, if married, the student's spouse) was not emp 2015.		
C. NON-TAX FILERS—Complete this section if you, the studen are not required to file a 2015 income tax with the IRS or oth applies:	er government agency.	Check the box that
 I, the student, completed a 2015 foreign tax return or a tax return Associated States. A tax transcript is attached, from a taxing at Guam, U.S. Virgin Islands, and Puerto Rico) or Freely Associates of Micronesia, and Palau). For Non-IRS tax filers, you may submit a tax transcript that authority of a U.S. Territory (American Samoa, Guam, U.S. Associated States (the Marshall Islands, the Federated State). If a Tax Transcript is not available, or there is a cost associated respective taxing authority, then you MUST submit a signed statement. 	uthority of a U.S. Territ ted States (the Marshal at was obtained at no co S. Virgin Islands, and Pa tes of Micronesia, and Pa ciated with obtaining a	tory (American Samoa, I Islands, the Federated est from the relevant taxing werto Rico) or Freely Palau). transcript from the
B. NON-U.S. TAX RETURN FILERS (Tax-Filers of U.S. TER	RITORIES or Freely	Associated States ONLY)
 I, the student, am unable to use the IRS Data Retrieval Tool in F school my 2015 IRS Tax Transcript from the IRS. You can obtain an IRS Tax Transcript by: 1) Visit www.IR. Call 1-800-908-9946, or 3) use IRS Form 4506-T: Request 	<u>S.gov</u> and click on "Get	t a Tax Transcript," 2)
☐ I, the student, have used or will use the IRS Data Retrieval Tool married, my spouse's) 2015 IRS income information into my FAFSA.		
Complete this section if you, the student, filed or will file a 201 verify income is by using the IRS Data Retrieval Tool that is paused the tool, go to FAFSA.ed.gov, log in to your FAFSA reconnavigate to the Financial Information section of the form. From are eligible to use the IRS Data Retrieval Tool to transfer 2015	urt of FAFSA on the We cd, select "Make FAFSA m there, follow the insti	b. If you have not already 4 Corrections," and ructions to determine if you

IV: PARENT'S INCOME INFORMATION TO BE VERIFIED (Complete this section if you are a Dependent student & were required to provide Parent information on the FAFSA) Complete Section A, OR B, OR C. A. U.S. TAX RETURN FILERS (IRS Tax-Filers ONLY)—Check the box that applies Complete this section if the student's parent(s), filed or will file a 2015 income tax return with the IRS. The best way to verify income is by using the IRS Data Retrieval Tool that is part of FAFSA on the Web. If you have not already used the tool, go to FAFSA.ed.gov, log in to your FAFSA record, select "Make FAFSA Corrections," and navigate to the Financial Information section of the form. From there, follow the instructions to determine if you are eligible to use the IRS Data Retrieval Tool to transfer 2015 IRS income tax information into your FAFSA. I/We the student's parent(s), have used or will use the IRS Data Retrieval Tool in FAFSA on the Web to transfer my 2015 IRS income information into FAFSA or when making a correction to the FAFSA. ☐ I/We the student's parent(s), am/are unable to use the IRS Data Retrieval Tool in FAFSA on the Web, and will submit to the school my 2015 IRS Tax Transcript from the IRS. You can obtain an IRS Tax Transcript by: 1) Visit www.IRS.gov and click on "Get a Tax Transcript," 2) Call 1-800-908-9946, or 3) use IRS Form 4506-T: Request for Transcript of Tax Return B. NON-U.S. TAX RETURN FILERS (Tax-Filers of U.S. TERRITORIES or Freely Associated States ONLY) ∐ I/We the student's parent(s), completed a 2015 foreign tax return or a tax return with a U.S. territory or one of the Freely Associated States. A tax transcript is attached, from a taxing authority of a U.S. Territory (American Samoa, Guam, U.S. Virgin Islands, and Puerto Rico) or Freely Associated States (the Marshall Islands, the Federated States of Micronesia, and Palau). For Non-IRS tax filers, you may submit a tax transcript that was obtained at no cost from the relevant taxing authority of a U.S. Territory (American Samoa, Guam, U.S. Virgin Islands, and Puerto Rico) or Freely Associated States (the Marshall Islands, the Federated States of Micronesia, and Palau). - If a Tax Transcript is not available, or there is a cost associated with obtaining a transcript from the respective taxing authority, then you MUST submit a signed copy of the foreign tax return or wage & tax statement. C. NON-TAX FILERS—Complete this section if the student's parent(s) will not file and is not required to file a 2015 income tax return with the IRS or other government agency. Check the box that applies: Li/We the parent(s) was/were not employed and had no income earned from work in 2015.

Employer's Name	2015 Amount Earned	W-2/Wage Statement Attached??
Suzy's Auto Body Shop (example)	\$ 2,000.00	YES

∐ I/We the parent(s) was/were employed in 2015 and has/have listed below the names of all the employers, the amount earned from each employer in 2015. Copies of all 2015 W-2/wage statement forms issued by the

employer(s) are attached to this form.

V: OTHER INFORMATION TO BE VERIFIED

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Amount of Child Supp Paid in 2015
•	*	f this worksheet) receive benef own as food stamps) any time o	* *
Name of Person W	ho Received SNAP Benefit		ed SNAP Benefit 4, or 2015, or Both)
		(230 2 0 11 2 0 1	1, 01 2010, 01 2000,
A. Payments to tax-deferror List any payments (direct (e.g.401(k) or 403(b) played)	ans), including but not limited		
12d with codes D. E. F.		Total Amov	int Paid in 2015
12d with codes D, E, F,	Name of Person Who Made the Payment		III. Faiu III 2015
	Who Made the Payment		
	Who Made the Payment		

housing.

Name of Recipient	Type of Benefit Received	Amount of Benefit Received in 2015

C. Veterans Non-Education Benefits

List the total amount of veterans non-education benefits received in 2015. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.

DO NOT INCLUDE federal veterans educational benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, Post-9/11 GI Bill

Name of Recipient	Type of Veterans Non-Education Benefit	Amount of Benefit Received in 2015

D. Other Untaxed Income

List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability, black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc.

DO NOT INCLUDE any items reported or excluded in sections A – D above. In addition, **DO NOT INCLUDE** Student Aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Name of Recipient	Type of Other Untaxed Income	Amount of Other Untaxed Income Received in 2015

E. Money Received or paid on the student's behalf

List any money received or paid on the student's behalf (e.g., payment of student's bills) and not reported elsewhere on this form. Enter the total amount of cash support the student received in 2015. Include support from a parent whose information was not reported on the student's 2016—17 FAFSA, but **DO NOT INCLUDE** support from a parent whose information was reported. For example, if someone is paying rent, utility bills, etc, for the student or gives cash, gift cards, etc, include the amount of that person's contributions unless the person is the student's parent whose information is reported on the student's 2016—17 FAFSA. Amounts paid on the student's behalf also include any distributions to the student from a 529 plan owned by someone other than the student or the student's parents, such as grandparents, aunts, and uncles of the students.

Purpose: Rent, Books, Cash, etc.	Amount Received in 2015	Source

VII: ADDITIONAL INFORMATION—Support Certification

information about any other resoumembers of the student's househo (if dependent) income reported on or student's parents met their monbe reported on the FAFSA or othe things as low income housing, fed	rces, benefits, an ld. If the student this form is less thly expenses. The r forms submitted eral veterans edu	y's financial situation, please provide below d other amounts received by the student and any a (and spouse, if married) or student's parent(s) than \$5000, then please explain how the student his may include items that were not required to d to the financial aid office, and include such cation benefits, military housing, SNAP (food each a separate paper if you need more space.
	at all the information	on reported to qualify for Federal Student Aid is complete and l Aid Office may request additional information to verify
PRINT Student Name	Student ID #	
Student (signature)	Date	
Spouse (signature—if student is marrie	ed) Date	
Parent (signature) (required for dependent student)	Date	
SUBMIT Form In Person Submit by Email: finaid@	2609 Mapu Pago Pago,	

Page **6** of **6**

Submit by FAX: (684) 699-8968 OR (684) 699-1083