



Welch College

Student Financial Aid Office

2015-2016 Income Verification Worksheet

Student Information

Last Name: _____ First Name: _____ MI: _____
 Social Security #: _____ - _____ - _____ Date of Birth: ____/____/____

Instructions

1. Please complete all items on this form. Write "N/A" for items that do not apply.
2. Include parent's signature for dependent students.
3. Include spouse's information if you were married when you filed the FAFSA.
4. Include the name of the college that household member (excluding parents) will be attending if they plan to attend at least half-time between July 1, 2015 and June 30, 2016, and enroll in a program that leads to a college degree, diploma, or certificate.
5. **Return this form to:** Welch College Financial Aid Office, 3606 West End Avenue, Nashville, TN 37208 – fax 615.844.5004 – email finaid@welch.edu.

Family Information

List **all** people as part of your household only if they now **live with you** (if independent) or your **parents** (if dependent) AND you or your parents provide **more than half** of their support AND will continue to provide more than half of their support from July 1, 2014 through June 30, 2015. Attach a separate sheet if necessary.

Full Name	Age	Relationship	College (if attending at least half-time in 2015-2016)
		Self	Welch College

Tax Return Transcript & Income Information

To request an official 2014 Tax Return Transcript from the IRS, you may call 1-800-908-9946 or print a transcript online at www.irs.gov.

Student

- Check here if you are completing the IRS data match on www.fafsa.gov.
- Check here if you are attaching a signed copy of your IRS Tax Return Transcript.
- Check here if you did not file, will not, and are not required to file a 2014 U.S. Income Tax return. Attach copies of a W-2 from each employer.

Parent (Dependent Students Only)

- Check here if you are completing the IRS data match on www.fafsa.gov.
- Check here if you are attaching a signed copy of your IRS Tax Return Transcript.
- Check here if you did not file, will not, and are not required to file a 2014 U.S. Income Tax return. Attach copies of a W-2 from each employer.

Child Support Paid

If you (or your parent(s) if dependent) paid child support in 2014 please complete the following information:

Child Support Recipient: _____ Name of Child(ren): _____

2014 Amount Paid: _____ Signature of Person Paying Support: _____

Food Stamps (SNAP)

I certify 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. Yes No

Sign This Worksheet

By signing this worksheet, I (we) certify that all of the information is true and correct to the best of my knowledge and belief. I understand that purposely providing false or misleading information on this form may result in repayment of aid, fines and/or imprisonment in this and/or future years.

 Student Signature Date Parent Signature (Dependent Students) Date

FINANCIAL AID OFFICE