Return to:

5500 University Parkway San Bernardino, CA 92407 University Hall Room 150

Tel: (909) 537-5227 Fax: (909) 537-7024

2018-2019 Aggregate Verification Worksheet – V5

Complete this verification form and submit it as soon as possible. The Office of Financial Aid and Scholarships cannot determine your award without this information. Please complete ALL sections.

Name:	Coyote ID:
Email:	Phone:
Dependent Student*	Independent Student**

List the people in your parent(s)' household including:

- yourself and your parent(s) (including a stepparent) even if you don't live with your parents and
- your parent's other children, even if they do not live with your parent(s), if (a) your parents will provide more than half of their support from July 1, 2018, through June 30, 2019
- or (b) the children would be required to provide parental information if they were 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, 2018 through June 30, 2019.
- *A student is dependent if he/she was required to provide parental information on the FAFSA.

List the people in your household including:

- yourself and your spouse if you have one, and
- your children, if you will provide more than half of their support from July 1, 2018 through June 30, 2019
- even if they do not live with you, or if the child would be required to provide your information as the parent if they were applying for Federal Student Aid,
- 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, 2018, through June 30, 2019.
 - **A student is independent if he/she was not required to provide parental information on the FAFSA.

Section A: Family Information

Full Name	Age	Relationship to Student	College
		Self (student)	CSUSB

Note: Include the name of the college for any household member, excluding your parent(s), who will be enrolled at least half time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2018 and June 30, 2019. If more space is needed, attach a separate page with your name and Student ID Number at the top.

Section B: Dependent Student

to confirm my non-filing status.

Parent 2016 Tax & Income Information (Check ONE box only): **Tax Filers** ☐ The IRS Data Retrieval Tool was used to transfer my income information to the FAFSA. Date completed ☐ I have attached a copy of my 2016 Federal Tax Transcript & 2016 W-2 form(s). (https://www.irs.gov/individuals/get-transcript) Non-Filers ☐ I will not and am not required to file a 2016 U.S. Income Tax Return and have attached all 2016 W-2 form(s) along with IRS form 4506-T (verification of non-filing) to confirm my non-filing status. ☐ I was not employed and did not earn income in 2016 and have attached IRS form 4506-T (verification of non-filing) to confirm my non-filing status. Student 2016 Tax & Income Information (Check ONE box only): **Tax Filers** ☐ The IRS Data Retrieval Tool was used to transfer my income information to the FAFSA. Date completed ______ ☐ I have attached a copy of my 2016 Federal Tax Transcript & 2016 W-2 form(s). (https://www.irs.gov/individuals/get-transcript) Non-Filers ☐ I will not and am not required to file a 2016 U.S. Income Tax Return and have attached all 2016 W-2 form(s). ☐ I was not employed and did not earn income in 2016. Section C: Independent Student (and Spouse) 2016 Tax & Income Information (Check ONE box only) Tax Filers The IRS Data Retrieval Tool was used to transfer my income information to the FAFSA. Date completed ___ I have attached a copy of my 2016 Federal Tax Transcript & 2016 W-2 form(s), and spouse's if applicable. (https://www.irs.gov/individuals/get-transcript) Non-Filers ☐ I will not and am not required to file a 2016 U.S. Income Tax Return and have attached all 2016 W-2 form(s) along with IRS form 4506-T (verification of non-filing) to confirm my non-filing status.

I was not employed and did not earn income in 2016 and have attached IRS form 4506-T (verification of non-filing)

Section D: Student High School Completion Status

Ch	eck ONE box only:					
	I am attaching a copy of my final High School transcript which includes the date I completed High School I am attaching a copy of my GED Certificate or Transcript I am attaching a copy of my military DD214 that confirms that I am a high school graduate. I was home schooled and I am attaching a signed copy of my transcript or equivalent					
Se	ction E: Identity Verification					
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	 passport). I am attaching a notarized copy of my valid government issued photo identification (driver's license, state ID or passport) along with the Identity and Statement of Educational Purpose form. 					
Sec	ction F: Statement of Educational Purpose					
	☐ I am appearing in person to sign the statement below (must be signed in front of the Office of Financial Aid and Scholarship Staff).					
	I certify that I,, am the individual signing the Statement of Educational Purpose and that the federal student aid financial assistance I may receive will only be used from educational purposes while attending: California State University, San Bernardino for 2018-2019.					
	(Student's Signature) (Date)					
	I am unable to appear in person. I am attaching a notarized copy of the Identity and Statement of Educational Purpose form.					
	ch person signing this worksheet certifies that all information reported is complete and correct. If dependent, the dent and one parent must sign and date.					
Stu	dent Signature: Date:					
Pai	rent's Signature: Date:					
	Internal Use Only:					
	☐ Unexpired government issued photo ID has been verified for the student.					
	Staff Member Name Date					