

2016-2017 Verification Worksheet

DEPENDENT OTHER Income Information

Student: _____

Complete each of the items below. Please read through all of the information before providing answers, signatures, or documentation. Once you have completed this worksheet return it to the Financial Aid Office at Bridgerland Applied Technology College (BATC) along with the Dependent Student Certification & Signature page and any other items you are required to complete.

Answer each question below as it applies to you (the student) and your parent(s) whose information is on the FAFSA. If any answer does not apply, enter N/A for Not Applicable where a response is requested, or enter "0" in an area where an amount is requested. If more space is needed, provide a separate page with your name and student ID number at the top.

VERIFICATION of OTHER UNTAXED INCOME for 2015

A. Payments to tax deferred pension and retirement savings. List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans (e.g., 401(k) or 403 (b) plans), including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12d with codes D,E,F,G,H & S. **Attach copies of all 2015 IRS W-2 forms issued to you (the student) and your parent(s).**

Name of Person Who Made the Payment	Total Amount Paid in 2015
	\$
	\$
	\$

B. Child Support Received. List the actual amount of any child support received in 2015 for the children in your household. Do not include foster care payments, adoption payments, or any amount that was court ordered but not actually paid.

Name of Adult Who Received the Support	Name of Child for whom the Support was Received	Amount of Child Support Received in 2015
		\$
		\$
		\$
		\$
		\$

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C. Housing, food and other living allowances paid to members of the military, clergy, and others. Include cash payments and/or the cash value of benefits received. Do not include the value of on-base military housing or the value of a basic military allowance for housing.

Name of Recipient	Type of Benefit Received	Amount of Benefits Received in 2015
		\$
		\$
		\$

D. Veterans non-educational 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: POST 9/11 GI Bill, Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits.

Name of Recipient	Type of Veterans Non-education Benefit	Amount of Benefit Received in 2015
		\$
		\$
		\$

E. 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 A-D above. In addition, do not include extended foster care benefits, student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Innovation and Opportunity Act (WIOA) educational benefits, on-base military housing or a military housing allowance, 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
		\$
		\$
		\$

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F. Money received or paid on the students behalf. List any money received or paid on the students' 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 students 2016-2017 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 contribution unless the person is the students' parent whose information is reported on the students 2016-2017 FAFSA. Amounts paid on the students behalf also include any distributions to the student from a 529 plan owned by someone other than the student or the students' parents, such as grandparents, aunts, and uncles of the student.

Purpose: (e.g., Cash, Rent Books)	Amount Received in 2015	Source
	\$	
	\$	
	\$	
	\$	
	\$	

Additional Information

So that we may more fully understand the student's family's financial situation, please provide below information about any other resources, benefits, and other amounts received by the student and any members of the students' household. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office, and include such things as federal veterans education benefits, military housing, SNAP, TANF, etc.

Name of Recipient	Type of Financial Support	Amount of Financial Support Received in 2015

COMMENTS:
