

**INCOME & HOUSEHOLD SIZE  
INDEPENDENT VERIFICATION WORKSHEET  
2015-2016**

Your Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states 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 form. If there are differences, your FAFSA information will be corrected electronically. We may ask for additional information. If you have questions about verification please contact us at (605) 455-6000.

**A. STUDENT INFORMATION:**

STUDENT NAME: \_\_\_\_\_ SSN: \_\_\_\_\_  
 STREET ADDRESS: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_  
 DATE OF BIRTH: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_  
 HOME PHONE NUMBER: \_\_\_\_\_ CELL PHONE NUMBER: \_\_\_\_\_

**B. FAMILY HOUSEHOLD INFORMATION:**

List the following people below:

- 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 their 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 will provide more than half of their support and will continue to provide more than half of their support through June 30, 2016.

Number in College: Include below information about, any household member who 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.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time Yes or No
		<i>Self</i>	<i>Oglala Lakota College</i>	<i>Yes or No</i>

**C. EARNED INCOME (STUDENT):**

\_\_\_\_\_ **YES**, the student and/or spouse filed a 2014 Federal income tax return. Check the box that applies:

- The student and/or spouse have used the IRS Data Retrieval Tool in *FAFSA on the Web* to transfer 2014 IRS income tax return information into the student’s FAFSA.
- The student and/or spouse has not yet used the IRS Data Retrieval Tool in *FAFSA on the Web*, but will use the tool to transfer 2014 IRS income tax return information into the student’s FAFSA once the 2014 IRS income tax return has been filed.
- The student and or spouse are unable or chooses not to use the IRS Data Retrieval Tool in FAFSA on the Web, and instead will provide the school a **2014 IRS Tax Transcript(s)**.

To obtain a **2014 IRS Tax Return Transcript**, go to <http://www.irs.gov/Individuals/Get-Transcript> and click on the “Get Transcript ONLINE” link, or call 1-800-908-9946. Make sure to request the “IRS Tax Transcript”.

If the student and spouse filed separate 2014 IRS income tax returns, 2014 IRS Tax Return Transcripts must be provided for both.

\_\_\_\_\_ Check here if a **2014 IRS Tax Return Transcript(s)** is provided

\_\_\_\_\_ Check here if a **2014 IRS Tax Return Transcript(s)** will be provided later.

**D. INCOME INFORMATION FOR STUDENT NONTAX FILERS**

\_\_\_\_\_ **NO**, the student and spouse were not employed and had no income earned from work in 2014.

\_\_\_\_\_ **NO**, the student and spouse did not file and were not required to file a 2014 income tax return, but had earnings from work.

Report the earnings below and attach all 2014 W-2 forms.

Employer’s Name	2014 Amount Earned	IRS W-2 Provided?
	\$	Yes or No
	\$	Yes or No
	\$	Yes or No
	\$	Yes or No
	\$	Yes or No

Note: We may require you to provide documentation from the IRS that indicates a 2014 IRS income tax return was not filed with the IRS.

**E. CHILD SUPPORT PAID**

The student or spouse, who is a member of the student’s household, paid child support in 2014. 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 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.

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 Support Paid in 2014
			\$
			\$
			\$
			\$
			\$

**Note:** If we have reason to believe that the information regarding the child support paid is inaccurate, we may require additional documentation such as:

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks or money order receipts.

**F. RECEIPT OF SNAP BENEFITS**

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).

The student’s household includes:

- 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 the support through June 30, 2016.

**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.

\_\_\_\_\_ **NO**, the student or spouse or anyone in the student’s household **did not** received SNAP benefits anytime during 2013 or 2014.

---

**G. CERTIFICATION AND SIGNATURES:**

Each person signing below certifies that all of the verification information reported is complete and correct. The student **must** sign and date.

WARNING: If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.

\_\_\_\_\_

Print Student's Name

\_\_\_\_\_

Student's Social Security Number

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SPOUSE'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

All documentation requested must be received and reviewed before your financial aid can be finalized and disbursed. If you have questions or need assistance, please contact the Office of Financial Aid.