

Office of Financial Aid & Scholarships 316 Boulevard
Anderson, S.C. 29621
Direct 864.231.7555
Fax 864.540.8361

2020-2021 Verification Worksheet -Dependent

www.andersonuniversity.edu aid@andersonuniversity.edu

Your 2020-2021 application for financial aid has been selected for verification. Submit the requested documentation as soon as possible. Processing of your financial aid file cannot continue, and no financial aid can be awarded until the required information has been received. The authority for Anderson University to review the requested documents can be found in CFR Title 34, Part 668. If you are being asked to submit a 2018 Tax Return Transcript for you and/or your parent, you and/or your parent can request a tax return transcript from the IRS, or you can make a correction to your FAFSA and use the IRS Data Retrieval Tool. The Office of Financial Aid & Scholarships will not accept forms or transcripts faxed or emailed from the IRS. Visit www.andersonuniversity.edu/IRS for detailed information.

STUDENT NAME: _____ SSN or ID: ____

Section 1: Household Information									
their other deparent(s) at the provide the nar who will be end *Parent(s) med	pendent children. Include time you applied for fina me of the university or coll rolled in a degree, diploma ans your biological/adopt	e other people only if the control and and will contilege for family members or certificate program. ive parents if they are	they lived with your parties to receive this substantial with the substa	arent(s) and repport between g at least half Do not includer or are not	e sure to include yourself, your parent(s) and eceived more than half their support from your a July 1, 2020, and June 30, 2021. In addition, f-time during the 2020-2021 academic year and e the university or college for your parent(s). married to each other and live together; the				
biological/adoptive parent with whom you live if your parents are divorced, separated or if one parent is deceased; or the biological/adoptive parent and stepparent with whom you live. Parent(s) does not mean grandparents, foster parents, aunts and uncless they have legally adopted you.									
Full Name of		Relationship to	Date of Birth	Age	Name of University or				
Family Member		Student	(mm/dd/yy)		College Attending in 2020-2021				
		Self			Anderson University				
Section 2: Student's Income Information									
I have filed a 2018 federal income tax return.									
OR									
I will not and am not required to file a 2018 federal income tax return.									
If you will not file a 2018 federal income tax return, check the ONE box that applies.									
The student was not employed and had no income earned from work in 2018.									
The student was employed in 2018; was not required to file a 2018 federal income tax return; and has listed below the names of all employers, the amount earned from each employer in 2018, and whether an IRS W2 form is provided. Please provide a copy of all 2018 IRS W2 form(s) issued to the student by an employer. List every employer even if the employer did not issue an IRS W2 form. If more space is needed, provide a separate page with the student's name and ID number at the top.									
	Employer's Name			IRS W2 Provided?	Total Amount Earned in 2018				
(Example) ABC Diner			Yes	\$4,500					

Section 3: Parent's Income	Information				
I () b £1-1 - 2019 £-1-					
I (we) have filed a 2018 fede	erai income tax return.				
OR					
I (we) will not and are not re	quired to file a 2018 fede	eral income tax return.			
of Non-Tax Filing Letter	r from the IRS dated	return, check the ONE bo on or after October 1, 20 edu/IRS for detailed infor	19, that ind	<u>ies.</u> You must provide a Verification icates a 2018 IRS income tax return	
The parent(s) were	not employed and had n	o income earned from work in	2018.		
of all employers, the copy of all 2018 II	ne amount earned from e RS W2 form(s) issued to	ach employer in 2018, and wh	ether an IRS V List every en	ax return; and have listed below the names W2 form is provided. Please provide a apployer even if the employer did not issue ame and ID number at the top.	
	Employer's Name		S W2 rided?	Total Amount Earned in 2018	
(Example) ABC Diner		es es	\$4,500		
Castian A. Cartifications Ci	anotymes and Cor	staat Information			
Section 4: Certifications, Si	gnatures and Cor	itact information			
By signing this <i>Verification Work</i> complete and correct. At least one		that all information repor	rted to quali	ify for federal financial assistance is	
Student Signature:		Da	Date:		
Parent Signature:	Da	Date:			
Student's Mailing Address:	Street	City		State and Zip	
	Butt	City		ome and Lip	
				-	