

Office of Financial Aid  
2500 California Plaza • Harper Center Ste. 1100 • Omaha, NE 68178  
402-280-2731 • 1-800-282-5835 • Fax 402-280-2895

### WHAT IS VERIFICATION?

The U.S. Department of Education (ED) randomly selects students for schools to verify information on their FAFSA. Your FAFSA has been selected for us to collect and verify information related to your FAFSA answers.

### INSTRUCTIONS – PLEASE READ EACH SECTION CAREFULLY

- Complete all sections of this worksheet. Write “0” for any income not received and “N/A” for sections that do not apply
- Collect requested 2016 financial documents for you and your spouse (if married).
- Submit this completed form along with the required financial documents to the address, fax, or email at the top of this page.

Documents should be submitted within 30 days of the initial request to avoid a significant delay in receiving your financial aid. We will notify you if additional information is needed.

### A. STUDENT INFORMATION (please print neatly):

|                            |            |          |                               |
|----------------------------|------------|----------|-------------------------------|
| Last Name                  | First Name | M.I.     | Student NET ID                |
| Address (include apt. no.) |            |          |                               |
| City                       | State      | Zip Code | Phone No. (include area code) |

### B. FAMILY INFORMATION If more space is required, attach a separate page

| Full Name   | Age   |              |         |
|---|---|--------------|---------|
| Write the names of the people in your household in the chart below.<br>1. Include <b>yourself</b> .<br>2. Include <b>your spouse</b> , if you are married.<br>3. Include <b>your children or spouse's children</b> , if you or your spouse will provide <i>more than half</i> of their support between July 1, 2018 and June 30, 2019, even if the children do not live with you.<br>4. Include <b>other dependents</b> , if they now live with you and you or your spouse will continue to provide <i>more than half</i> of their support through June 30, 2019. | Write the age of each family member in the chart below.                         |              |         |
|   | Relationship  |              |         |
|   | Write the relationship of each family member to the student in the chart below. |              |         |
|   | College   |              |         |
| Add the name of the college for any household member who will be enrolled in a degree, diploma or certificate program at an eligible postsecondary educational institution at least half-time any time between July 1, 2018 and June 30, 2019.  |   |              |         |
| Full Name   | Age   | Relationship | College |
|   |   |              |         |
|   |   |              |         |
|   |   |              |         |
|   |   |              |         |
|   |   |              |         |
|   |   |              |         |
|   |   |              |         |

NET ID: \_\_\_\_\_

Student First Name \_\_\_\_\_

Student Last Name \_\_\_\_\_

Student's Name: \_\_\_\_\_ NET ID: \_\_\_\_\_

**C. INDEPENDENT STUDENT'S INFORMATION**

**Submit an official IRS Tax Return Transcript** if you filed a 2016 U.S. Tax Return and you did not use the IRS Data Retrieval Tool when you filed your FAFSA. This applies to both student and student's spouse (if applicable).

**To request an IRS Tax Return Transcript:**

- To request a transcript online, go to [www.irs.gov/Individuals/Order-a-Transcript](http://www.irs.gov/Individuals/Order-a-Transcript). Request the 2016 Tax Return Transcript or to order by phone, call 800-908-9946 and follow the prompts.
- To request a transcript or verification of non-filing by mail, complete IRS Form 4506-T [www.irs.gov/pub/irs-pdf/f4506t.pdf](http://www.irs.gov/pub/irs-pdf/f4506t.pdf).

**If you filed a Foreign Tax Return:**

- Submit a signed and dated copy of the form to our office. The form must be translated into English, OR
- Submit a statement of income, if you earned income in a country that does not require you to file tax returns.

**STUDENT'S INCOME INFORMATION: Tax Return Non-filers**

**Complete this section if the student will not file and is not required to file a 2016 income tax return with the IRS. Student must provide a Verification of Non-Filing from the IRS (a website link is provided above).**

**Check the box that applies:**

- I (the student) was not employed and had no income earned from work in 2016.
- I (the student) was employed in 2016 and have listed below the names of all my employers and the amount earned from each employer in 2016.
- I (the student) was employed in 2016 and had income, but am not required to file a 2016 Federal IRS Tax Return.

Non-tax filers with 2016 earnings are federally required to submit a copy of W-2(s) from each employer to Creighton University with this form.

| Employer's Name | 2016 Amount Earned | W-2 Attached? |
|-----------------|--------------------|---------------|
|                 | \$                 |               |
|                 | \$                 |               |

**D. SPOUSE'S INCOME INFORMATION: Tax return Non-filers**

**Complete this section if the student's spouse will not file and is not required to file a 2016 income tax return with the IRS. Student's spouse must provide a Verification of Non-Filing from the IRS (a website link is provided above).**

**Check the box that applies:**

- Spouse filed a 2016 Federal IRS Tax Return, Puerto Rican, or Foreign Tax Return.
- Spouse was not employed and had no income earned from work in 2016.
- Spouse was employed in 2016 and has listed below the names of all employers and the amount earned from each employer in 2016.

Attach copies of all 2016 W-2 forms issued to the spouse(s). List every employer even if they did not issue a W-2 form.

| Employer's Name | 2016 Amount Earned | W-2 Attached? |
|-----------------|--------------------|---------------|
|                 | \$                 |               |
|                 | \$                 |               |

**D. OTHER INFORMATION**

| Please list dollar amounts or "0" for the following items:   | You, the student | Parent/Spouse |
|--|------------------|---------------|
| A. Taxable earnings from <b>Federal Work-Study</b> or other need-based work program.   | \$               | \$            |
| B. <b>Tuition for Younger Children:</b> If you have out-of-pocket costs for younger children in private elementary, middle, or high school for the 2018-19 academic year, please list the amount you will pay after scholarships and discounts are applied | \$               | \$            |

**E. SIGNATURE**

By signing below, you certify that the information provided in this document is true, complete, and accurate to the best of your knowledge. You further understand that any false statements or misrepresentations will be cause for denial, reductions, withdrawal, and/or repayment of financial aid. Please note: Additional documentation may be requested if further information is required.

Student's Signature (handwritten signature required)

Date