RETURN TO: FINANCIAL AID OFFICE
P. O. BOX 17065
1400 J. R. LYNCH STREET
JACKSON, MS 39217-0165
OFFICE: 601-979-2227 • FAX: 601-979-2237
EMAIL: finaid@jsums.edu

2016-2017 INDEPENDENT STANDARD VERIFICATION GROUP (V1) FORM

		J
(Student's Last Name)	(Student's First Name)	(Student's J-Number)

A. Instructions

Clearly print and complete **ALL** information. Do not leave any items blank; enter "N/A" if not applicable. **If more space is needed for any of the sections, provide a separate sheet that includes the information. Include the student's name and J-Number at the top of each sheet.**

B. Student's Household and College Information

List below the people in the student's household; include: (1) the student; (2) the student's spouse if married; (3) the student's children/step-children if the student or spouse provides more than half of the other person's support and will continue to provide more than half of that person's support through June 30, 2017 and (4) other people if they now live with the student and the student or spouse, if married, provides more than half their support through June 30, 2017 and will continue between July 1, 2016 through June 30, 2017; and (5) include any household member who is, or 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, 2016, and June 30, 2017. (Attach separate sheet if needed.)

Full Name	Age	Relationship To Student	College	Will Be Enrolled At Least Half-Time (Yes Or No)
		SELF	JACKSON STATE NIVERSITY	YES

C. Supplemental Nutrition Assistance Program (SNAP)

Did the student or any member of the student's household listed in Section B receive benefits from the Supplemental Nutrition Assistance Program (SNAP) during the calendar year of 2014 or 2015?

(Check Yes or No): ____ Yes, list name: _____; ____ No, (continue to Section D)

D. Child Support Paid

Did the student or a member of the student's household pay child support due to a "Court Mandated" requirement in 2015? (Check Yes or No, ___ Yes or ___ No.) If "Yes", complete the table below. If No, write "0" in the Amount Paid column and continue to Section E.

Name Of Person Who Paid Child Support	Name Of Person To Whom Child Support Was Paid	Name Of Child For Whom Child Support Was Paid	Age Of Child	Annual Amount Of Child Support Paid In 2015
				$
Total Amount Of Child Support Paid				$

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E. Verification of 2015 Income Information for Student Tax Filers

TAX FILERS: Complete this section if the student and spouse, if married, filed or will file a 2015 IRS income tax return.

Check the box that applies:

- ❒ The student has used the IRS DRT in FAFSA on the Web to transfer their 2015 IRS income tax return information into the student's FAFSA.
- ❒ The student has not yet used the IRS DRT in FAFSA on the Web, but will use the tool to transfer their 2015 IRS income tax return information into the student's FAFSA once the 2015 IRS income tax return has been filed.
- ❒ The student is unable or chooses not to use the IRS DRT in FAFSA on the Web, and instead will provide their 2015 IRS Tax Return Transcript(s) to the school.

If the student and spouse, if married, FILED SEPARATE 2015 IRS income tax returns, 2015 IRS Tax Return Transcripts must be provided for each.

Check the box that applies:

- ❒ Check here if a 2015 IRS Tax Return Transcript(s) is provided.
- ❒ Check here if a 2015 IRS Tax Return Transcript(s) will be provided later.

You must use your and your spouse's, if married, 2015 Federal Tax Return to complete the items below (enter "0" if no funds received).

Untaxed Assistance Received	Student and Spouse	Amount Received in 2015
Untaxed portions of IRA distributions from IRS Form 1040—lines (15a minus 15b) or 1040A—lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.	Student	$
	Spouse	$
Untaxed portions of pensions from IRS Form 1040—lines (16a minus 16b) or 1040A—lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.	Student	$
	Spouse	$
IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040—line 28 + line 32 or 1040A—line 17.	Student	$
	Spouse	$
Tax exempt interest income from IRS Form 1040—line 8b or 1040A—line 8b.	Student	$
	Spouse	$
Education credits (American Opportunity Tax Credit and Lifetime Learning Tax Credit) from IRS Form 1040—line 50 or 1040A— line 33.	Student	$
	Spouse	$

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F. Verification of 2015 Income Information for Student Non-Tax Filers

NON-TAX FILERS: Complete this section if the student and spouse, if married, will not file and are not required to file a 2015 income tax return with the IRS.

Check the box that applies:

- ❒ The student was not employed and had no income earned from work in 2015.
- ❒ The spouse was not employed and had no income earned from work in 2015.
- ❒ The student and spouse, if married, were employed in 2015 but were not required to file a 2015 federal tax return: (1) list below the names of all employers, (2) the amount of income earned from each employer; and (3) indicate whether the IRS W-2 form(s) are attached.

NOTE: List every employer even if the employer did not issue a W-2 form. Copies of all 2015 IRS W-2 forms issued to the student and spouse, if married, must be submitted to the Financial Aid Office.

Employer's Name	Annual Amount Earned in 2015	IRS W-2 Form Attached? (Yes or No)
JSU Financial Aid Office (example)	$ 4,500.00	Yes
Total Amount of Income Earned From Work	$	

G. CERTIFICATION

Each person signing this worksheet certifies that all of the information reported on it is correct and complete.

WARNING: If an individual purposely gives false or misleading information on this worksheet, he/she may be fined, be sentenced to Jail, or both.

_____ _____
(Student's Contact Phone Number) (Student's E-Mail Address)

_____
(Student's Street Address - Include Apt. Number)

_____ _____ _____
(City) (State) (Zip Code)

_____ _____
(Student's Date of Birth) (Student's Social Security Number)

_____ _____
(Student's Signature) (Date)