UNIVERSITY OF MICHIGAN MEDICAL SCHOOL
FINANCIAL AID OFFICE
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2014-2015 INDEPENDENT VERIFICATION WORKSHEET

STEP 1 – STUDENT INFORMATION

Last Name *First Name* *Social Security Number* *Student ID Number*

Permanent Address *Street & Number* *City/State/Zip* *Date of Birth*

Local Phone Number (Include Area Code) *Permanent Phone Number (Include Area Code)* *Email Address*

STEP 2 – FAMILY INFORMATION

include:

- Yourself
- Your spouse (if you are married)
- Your children if you will provide more than half of their support from July 1, 2014 through June 30, 2015
- Other people only if they live in your household and you provide more than half of their support and will continue to do so from July 1, 2014 through June 30, 2015

Full Name	Age	Relationship	Name of College/Degree Program (If at least half-time 2014-2015)
		Self	*University of Michigan Medical School*

STEP 3 – SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM - CALENDAR YEAR 2013

Were you eligible to receive benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as Food Stamp Program) during the calendar year 2013?

_____**YES**…Attach documentation showing that you qualified for the benefit during the calendar year 2013. Continue to STEP 4

_____**NO**…Continue to STEP 4

- OVER -

STEP 4 – STUDENT AND SPOUSE TAX TRANSCRIPT & INCOME INFORMATION – CALENDAR YEAR 2013

Are you or will you be required to file a 2013 Federal Income Tax Return?

_____**YES** Check the appropriate box below:

_____ I used the IRS Data Retrieval Tool in completing my FAFSA and I did not change any of the imported information, continue to STEP 5.

_____ I DID NOT use the IRS Data Retrieval Tool or I changed imported information when completing my FAFSA. Attach a copy of a **SIGNED Federal Tax Return Transcript from the IRS (NOT a copy of Federal Tax Return filed**), continue to STEP 5.

_____**NO** Complete the table below and attach copies of ALL 2012 W-2 forms and continue to STEP 5.

Source of Income (Fill out only if you did NOT file taxes)	**Amount Earned in 2013**
TOTAL	

NOTE: We cannot accept a signed copy of the tax return. To request a Tax Return Transcript or a "W-2 Wage Summary" (if you did not keep a copy of your W-2 form) *call the* ***IRS at 800.908.9946****. Please be advised that it may take a minimum of three weeks for the IRS to mail these documents to you.*

STEP 5 – CHILD SUPPPORT PAID – CALENDAR YEAR 2013

Did you pay child support because of divorce or separation during the calendar year 2013? (Do not include support for children included in household size in STEP 2)

_____**YES**…Complete the table below and continue to STEP 6.

_____**NO**…..Continue to STEP 6.

Amount of Child Support Paid	**Name of Who Child Support Was Paid To**	**Name of Child Paying Support For**
TOTAL:		

STEP 6 – CERTIFICATION: **By signing this worksheet, I certify all the information reported is complete and correct:**

Student Signature ***Date*** ***Student Name (Please Print)*** ***Student ID Number***

Spouse Signature (IF Student is married) ***Date*** ***Spouse Name (Please Print)***