

UNIVERSITY OF MICHIGAN MEDICAL SCHOOL

FINANCIAL AID OFFICE

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2015-2016 DEPENDENT VERIFICATION WORKSHEET

STEP 1 – STUDENT INFORMATION

| | | | |
|---|---|-------------------------------|--------------------------|
| <i>Last Name</i> | <i>First Name</i> | <i>Social Security Number</i> | <i>Student ID Number</i> |
| <i>Permanent Address</i> | <i>Street & Number</i> | <i>City/State/Zip</i> | <i>Date of Birth</i> |
| <i>Local Phone Number (Include Area Code)</i> | <i>Permanent Phone Number (Include Area Code)</i> | | <i>Email Address</i> |

STEP 2 – FAMILY INFORMATION

Include:

- Yourself
- Your parent(s) (including step-parents)
- Your parent(s) other dependent children if a) your parent(s) will provide more than half of their support from July 1, 2015 through June 30, 2016, or b) the children would be required to provide parental information when applying for Federal Student Aid
- Other people only if they now live in your parent household and your parents will provide more than half of their support from July 1, 2015 through June 30, 2016

| Full Name | Age | Relationship | Name of College/Degree Program (If at least half-time 2015-2016) |
|-----------|-----|--------------|--|
| | | <i>Self</i> | <i>University of Michigan Medical School</i> |
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STEP 3 – SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM – CALENDAR YEAR 2014

Were your parents eligible to receive benefits from the Supplemental Nutrition Program or SNAP (formerly known as the Food Stamp Program) during the calendar year 2014?

_____ YES...Attach documentation showing that you qualified for the benefit during the calendar year 2014. Continue to STEP 4

_____ NO...Continue to STEP 4

STEP 4 – STUDENT TAX TRANSCRIPT & INCOME INFORMATION – CALENDAR YEAR 2014

Are you or will you be required to file a 2014 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 2013 W-2 forms and continue to STEP 5.

| Source of Income (Fill out only if you did NOT file taxes) | Amount Earned in 2014 |
|---|--------------------------|
| | |
| | |
| 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 –SPOUSE OR PARENT TAX TRANSCRIPTS & INCOME INFORMATION –CALENDAR YEAR 2014

Are you or will you be required to file a 2014 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 6.
- 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 6.

NO Complete the table below and attach copies of ALL 2014 W-2 forms and continue to STEP 6.

| Source of Income (Fill out only if you did NOT file taxes) | Amount Earned in 2014 |
|---|--------------------------|
| | |
| | |
| 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 800.829.1040. Please be advised that it may take a minimum of three weeks for the IRS to mail these documents to you.

STEP 6 – CHILD SUPPPORT PAID – CALENDAR YEAR 2014

Did your parents pay child support because of divorce or separation during the calendar year 2014? (Do not include support for children included in household size in STEP 2)

YES...Complete the table below and continue to STEP 7.

NO...Continue to STEP 7.

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

STEP 7 – 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 |
| Parent Signature | Date | Parent Name (Please Print) | |