



**Do Not Staple**

**STONEHILL COLLEGE**

Student Financial Assistance

**For Official Use Only**  
**VRFNEW Status:**

## 2017-2018 New Student Verification Form

Your application has been selected for verification; therefore, the following information must be provided by you, the student, and by your custodial parent(s). This form must be completed in its entirety. **DO NOT LEAVE ANY ITEM BLANK. ENTER ZERO (0) OR NOT APPLICABLE (N/A) WHERE APPROPRIATE. PLEASE USE BLACK INK.**

Complete and date this form AFTER you have completed your FAFSA. If other documentation is needed, it will be specifically requested.

Student Name: \_\_\_\_\_

Permanent Street Address: \_\_\_\_\_  
\_\_\_\_\_

Cell Number: (        ) \_\_\_\_\_ Carrier: \_\_\_\_\_ Stonehill ID #: \_\_\_\_\_

### 1. Custodial Parent(s) Information

Include custodial parent(s) information if:

- Your legal parents (your biological and/or adoptive parents) are married to each other or not married to each other and live together, regardless of their gender; or
- Your legal parents are remarried, include the information for the parent and stepparent you live with more than 50% of the time when not away at school; or
- Your legal parents are divorced or separated, include the information for only the parent you live with more than 50% of the time when not away at school.

Parent 1  / Stepparent 1  (check one)

Parent 2  / Stepparent 2  (check one)

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

### 2. Household Information

List below all persons who are in your custodial parents' household. (If more than 6, list and attach on separate page.)

- Your custodial parent(s), and
- Your parents' other children if your parent(s) will provide more than half of their support between July 1, 2017 and June 30, 2018 or if other children would be required to provide parental information when completing the FAFSA for 2017-2018.
- Other people if they now live with your parents and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2017 through June 30, 2018.

Full Name	Relationship to Student	Date of birth	College this person will attend in academic year 17-18, if any	Number of courses per semester in 17-18	Student Enrolled in Graduate School (Yes or No)
1. You, the student	-----	-----	Stonehill College	-----	-----
2.	Parent 1/Stepparent		-----	-----	-----
3.	Parent 2/Stepparent		-----	-----	-----
4.					
5.					
6.					

### 3. Untaxed Income and Benefits in 2015

Enter Ø if not applicable. Don't leave any item Blank	Student	Custodial Parent(s)
Child support received (total for ALL children in household)	N/A	\$
Worker's Compensation	\$	\$
Bills paid by a third party on your behalf	\$	\$
Other, including SSDI and Veterans' Benefits	\$	\$
Welfare (e.g. TANF, AFDC or ADC) and untaxed Social Security benefits	\$	\$

### 4. Child Support Paid in 2015

Did one (or both) of the student's parents listed in Section 2 of this worksheet pay child support in 2015?  Yes  No

**If yes**, please complete the following grid. If you need additional space, please attach a separate sheet of paper with the following information:

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support was Paid	Amount of Child Support Paid in 2015
			\$
			\$

### 5. Asset Information

**As of the day you completed the FAFSA**, what was the value of the following accounts?

**Do not leave any item blank. Enter zero (Ø) if applicable.** Do not include values of 401k or 403b accounts.

Type of Account	Student	Custodial Parent(s)
Cash	\$	\$
Investments (e.g., stocks, 529 plans)	\$	\$
Other (e.g., trusts)	\$	\$

Value of Series EE bonds  you /  your parent(s) redeemed in 2015: \$ \_\_\_\_\_

Student 2016 Taxable Interest Dividend Income \$ \_\_\_\_\_ Parent 2016 Taxable Dividend Income \$ \_\_\_\_\_

Is either parent self-employed? Yes  No  **If yes:** What is the total number of businesses? \_\_\_\_\_

Percentage of business family owns? \_\_\_\_\_ Number of full time employees at each business: \_\_\_\_\_

### 6. Custodial Parent Property Information

Property Description	Principal Residence		Other 1**	Other 2**
	<input type="checkbox"/> Rent	<input type="checkbox"/> Own (check one)		
Address				
Current resale value				
Balance of mortgage(s)				
Year of purchase				
Purchase price				

\*\*Other 1, 2 includes investment properties, vacation homes, time shares, land, and/or commercial properties. Please attach a separate sheet of paper to list additional properties. Business property reported on a business tax return should not be included on this grid.

### 7. Student Statement of Tax Filing Status

**Note:** If net earnings from self-employment (babysitting, mowing lawns, etc.) are \$400 or more, you are required to complete a federal tax return with Schedule C or C-EZ.

**Did the student file a 2015 federal tax return?** Yes  No

If yes, submit a copy of the 2015 federal tax return with schedules and 2015 W2s.

If no, complete the following:

I was not employed and had no income from work in 2015.

I was employed in 2015; however I did not and I was not required to file a 2015 federal income tax. I have listed below the names of all employers, the amount earned from each employer.

Employer's Name	2015 Amount Earned	IRS W-2 Attached?

### 8. Parent Statement of Tax Filing Status

**Note:** If net earnings from self-employment are \$400 or more, you are required to complete a federal tax return with Schedule C or C-EZ.

**Did the Custodial Parent(s) file a 2015 federal tax return?** Yes  No

If yes, submit a copy of the 2015 federal tax return with schedules and 2015 W2s.

If no, complete the following:

Neither parent was employed and neither parent had income from work in 2015.

One or both parents were employed in 2015; however we did not and were not required to file a 2015 federal income tax. I have listed below the names of all employers, the amount earned from each employer.

Employer's Name	2015 Amount Earned	IRS W-2 Attached?

### 9. Permission to Discuss Award

If you wish to give us permission to discuss your financial aid information with someone other than yourself and your custodial parent(s) please indicate below:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

### 10. Certificate Statements

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must sign and date this form.

**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Custodial Parent's Signature

\_\_\_\_\_  
Date

Please return within 10 days of request in PDF format to [finaid@stonehill.edu](mailto:finaid@stonehill.edu) (enter Student Name & Stonehill ID in subject line). Mail is also acceptable to: Student Financial Assistance, Stonehill College, 320 Washington Street, Easton, MA 02357