Students and Parents, please read instructions below:

You are required to submit this five-page form and any supporting documents to DataBank for processing. Documents can be submitted by U.S. Mail or by fax.

List the student's SIS Student ID on each page submitted. This number is available on the My Financial Aid homepage, in the Message Box: http://financialaid.case.edu/myfinancialaid.aspx

If you have any questions, please feel free to contact us at financialaid@case.edu or call 216-368-4530 or 1-800-945-4530.

Please complete and return all five pages of this form (and any supporting documentation) to:

Case Western Reserve University
Office of University Financial Aid
c/o DataBank
P.O. Box 614
Chesterton, IN 46304
866-645-4210 (fax)

For Office Use Only:

Aid Year: 2017

Document Name: FA Verification Form
Federal regulations require selected applicants to verify information reported on the 2016–2017 Free Application for Federal Student Aid (FAFSA) or Renewal FAFSA Application. Your application was selected for verification by the U. S. Department of Education or the Office of University Financial Aid.

Case Western Reserve University cannot award/disburse Federal financial aid until we receive this information.

I. Student Information

Citizenship status:  
- U.S. Citizen  
- Permanent Resident  
- Neither

All students must complete Sections I–II and V–VI. Parents of dependent students must complete Sections II and IV–VI.

II. Important Tax Related Information for Students and Parents

Tax Filers, please read the instruction below:

If the student and/or parent(s), filed or will file a 2015 Federal Income Tax Return with the IRS, the best way to verify income is to use the IRS Data Retrieval Tool on FAFSA on the Web. Go to www.fafsa.gov and log into your FAFSA record, select “Make FAFSA Corrections” and navigate to the Financial Information section of the form. Follow the instructions to determine if you are eligible to use the IRS Data Retrieval Tool to transfer 2015 IRS income information onto your FAFSA. It takes up to two weeks for IRS income to be available for the IRS Data Retrieval Tool for electronic IRS tax filers, and up to eight weeks for paper IRS filers.

Students and parents who cannot or choose not to use the IRS Data Retrieval Tool on FAFSA on the Web must submit the 2015 Tax Return Transcript. To obtain an IRS Tax Return Transcript, go to www.irs.gov and click on “Order a Return or Account Transcript” link, or call 1-800-908-9946. Request the “IRS Tax Return Transcript.” You will need your Social Security Number, date of birth, and the address on file with the IRS. If you are married and you and your spouse filed separate 2015 returns, you must submit the 2015 Tax Return Transcript for both you and your spouse.

Check the box that applies:

Students:
- I/we, the student (and spouse), have used or will use the IRS Data Retrieval Tool to transfer my/our 2015 IRS Income information on to my FAFSA;  
- I/we, the student (and spouse), am/are unable or choose not to use the IRS Data Retrieval Tool, and will submit the 2015 IRS Tax Return Transcript.  
- I/we are submitting the IRS Tax Return Transcript to the address on the first page.  
- I/we will submit the IRS Tax Return Transcript at a later date. (Date _____________________)

Note: Verification cannot be completed nor aid disbursed until the IRS Tax Transcript has been submitted.

Non-Tax Filers must complete the Student/Spouse Affidavit of 2015 Income, and submit W-2s from each employer.

- I, (we) the student/spouse am/are not required to file a 2015 Federal Income Tax Return, but will submit the Student/Spouse Affidavit of 2015 Income.

Parents:
- I (we), the parent(s), have used or will use the IRS Data Retrieval Tool to transfer my/our 2015 IRS Income information on to the FAFSA;  
- I (we), the parent(s), am/are unable or choose not to use the IRS Data Retrieval Tool, and will submit the 2015 IRS Tax Return Transcript.  
- I (we) are submitting the IRS Tax Return Transcript to the address on the first page.  
- I/we will submit the IRS Tax Return Transcript at a later date. (Date _____________________)

Note: Verification cannot be completed nor aid disbursed until the IRS Tax Transcript has been submitted.

Non-Tax Filers must complete the 2015 Parent Non-Filer Verification Statement, and submit W-2s from each employer.

- I, (we) the parent(s) am/are not required to file a 2015 Federal Income Tax Return, but will submit the 2015 Parent Non-Filer Verification Statement.
III. Student’s (and spouse’s) 2015 Income Information

A. Excluded Income: (List source and amount in all cases; if none, write “zero”.)
   a. American Opportunity/Lifetime Learning Credit for 2015 from IRS Form 1040 Line 50 or 1040A line 33. $ _______________.00
   b. Taxable earnings from need-based employment programs such as Federal Work Study, fellowships, assistantships. (If these earnings were received from another school, submit a copy of your 2015 Form W-2 as instructed.) $ _______________.00
   c. Taxable student grant and scholarship aid reported to the IRS in your Adjusted Gross Income. Includes AmeriCorps benefits, grant and scholarship portions of fellowships and assistantships. $ _______________.00
   d. Combat Pay or Special Combat Pay. Report the amount that was taxable and included in your Adjusted Gross Income. Do not include untaxed combat pay. $ _______________.00
   e. Earnings from work under a Cooperative Education program offered by a college. $ _______________.00
   f. Child support paid by you/your spouse in 2015 because of divorce or separation or as a result of a legal requirement. Do not include support for children in your household who are reported in Section V. $ _______________.00

   If you (or your spouse, who is a member of your household) paid child support in 2015, please complete the table below:

<table>
<thead>
<tr>
<th>Name Of Person Who Paid Child Support</th>
<th>Name of Person To Whom Child Support Was Paid</th>
<th>Amount Of Child Support Paid In 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
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<td>7.</td>
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</tbody>
</table>

B. Untaxed Income: (List source and amount in all cases; if none, write “zero”.)
   a. Court-ordered child support received for student’s dependent children in 2015 $ _______________.00
   b. Payments to tax deferred pension and saving plans (paid directly or withheld from earnings, including but not limited to amounts reported on the W-2 forms in boxes 12a through 12d, codes D, E, F, G, H, S. Do not include amounts recorded as code DD) $ _______________.00
   c. Housing, food, and other living allowances paid to members of the clergy, military, and others, (including cash payments and cash value of benefits). Do not include the value of on-base housing or military allowance for housing. $ _______________.00
   d. Veterans non-educational benefits such as Disability, Death Pension, or Dependency and Indemnity Compensation (DIC) or VA Educational Work Study Allowances. $ _______________.00
   e. Other untaxed income such as workers’ compensation or disability. $ _______________.00
   f. Supplemental Nutrition Assistance Program (SNAP), formerly known as food stamps. $ _______________.00

   If you, as an independent student, reported benefits in III-B.-f. above, you are certifying that a member of your household received benefits from the Supplemental Nutritional Assistance Program (SNAP) (formerly known as the Food Stamp Program) sometime during 2014 or 2015.

   Your household includes: 1) you; 2) your spouse, if you are married; 3) your or your spouse’s children, if you or your spouse will provide more than one half of their support from July 1, 2016 through June 30, 2017, even if the children do not live with you; 4) other people, if they now live with you and you or your spouse provide more than one half of their support and will continue to provide more than one half of their support through June 30, 2017.

   SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243).
IV. Parents’ 2015 Income Information

Parents of dependent students must complete Sections IV–VI.

Parents of students enrolled in the School of Dentistry must complete Sections IV–VI for consideration for Health Profession Student Loan Funds.

A. Excluded Income: (List source and amount in all cases; if none, write “zero”.)

a. American Opportunity/Lifetime Learning Credit for 2015 from IRS Form 1098 Line 50 or 1040A Line 33 .................................................................................................................. $ 00

b. Taxable earnings from need-based employment programs such as Federal Work Study, fellowships, assistantships.................................................................................................................. $ 00

(If these earnings were received from another school, submit a copy of your 2015 Form W–2 as instructed.)

c. Taxable student grant and scholarship aid reported to the IRS in your Adjusted Gross Income. Includes AmeriCorps benefits, grant and scholarship portions of fellowships and assistantships........................................ $ 00

d. Combat Pay or Special Combat Pay. Report the amount that was taxable and included in your Adjusted Gross Income. Do not include untaxed combat pay.................................................................................................................. $ 00

e. Earnings from work under a Cooperative Education program offered by a college. .................................................................................................................. $ 00

f. Child support paid by you/your spouse in 2015 because of divorce or separation or as a result of legal requirement. .................................................................................................................. $ 00

(Do not include support for children in your household who are reported in Section VI)

If one of the parents included in the household or the student paid child support in 2015, please complete the table below:

<table>
<thead>
<tr>
<th>Name Of Person Who Paid Child Support</th>
<th>Name Of Person To Whom Child Support Was Paid</th>
<th>Name Of Child For Whom Support Was Paid</th>
<th>Age Of Child For Whom Support Was Paid</th>
<th>Amount Of Child Support Paid In 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
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</tbody>
</table>

B. Un taxed Income:

a. Court-ordered child support received for parents’ dependent children in 2015.................................................................................................................. $ 00

b. Payments to tax deferred pension and saving plans (paid directly or withheld from earnings, including but not limited to amounts reported on the W–2 forms in boxes 12a through 12d, codes D, E, F, G, H, S. Do not include amounts recorded as code DD. .................................................................................................................. $ 00

c. Housing, food, and other living allowances paid to members of the clergy, military, and others, (including cash payments and cash value of benefits). Do not include the value of on-base housing or military allowance for housing.................................................................................................................. $ 00

d. Veterans non-educational benefits such as Disability, Death Pension, or Dependency and Indemnity Compensation (DIC) or VA Educational Work Study Allowances.................................................. $ 00

e. Other untaxed income such as workers’ compensation or disability.................................................. $ 00

f. Supplemental Nutrition Assistance Program (SNAP), formerly known as food stamps. ......................... $ 00

If you, as the parent of a dependent student, reported benefits in III-B.-f. above, you are certifying that a member of your household received benefits from the Supplemental Nutritional Assistance Program (SNAP) (formerly known as the Food Stamp Program) sometime during 2014 or 2015.

Your household includes: 1) the student; 2) the parents (including a step-parent), even if the student does not live with the parents; 3) the parents’ other children, if: a) the parents will provide more than one half of their support from July 1, 2016 through June 30, 2017; or b) if the other children would be required to provide parental information if they were completing a FAFSA for 2016-2017. [Include children who meet either of these standards, even if the children do not live with the parents]; 4) other people, if they now live with the parents and the parents provide more than one half of their support and will continue to provide more than one half of their support through June 30, 2017.

SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243).
Dependent students should complete this table with information about the people that your parents (or custodial parent, see below) will support between July 1, 2016 and June 30, 2017. Include yourself, your parents and your parents’ other dependent children. Include other people only if they now live with and receive more than one-half their support from your parents and will continue to live with and receive this support through June 30, 2017. (For students whose parents are divorced, include only your custodial parent (and step-parent if the custodial parent has re-married), and all dependents residing with them. Do not include your non-custodial parent or any siblings who reside with that parent.)

Parent refers to a biological or adoptive parent. Grandparents, foster parents, legal guardians, older siblings or uncles and aunts are not considered parents unless they have legally adopted you. Custodial Parent, for federal student aid purposes, refers to the parent with whom you lived the most during the past 12 months. (The twelve month period is the twelve month period ending on the FAFSA application date, not the previous calendar year.) Note that this is not necessarily the same as the parent who has legal custody. If you did not live with one parent more than the other, the parent who provided you with the most financial support during the past twelve months should fill out the FAFSA. This is probably the parent who claimed you as a dependent on their tax return. If you have not received any support from either parent during the past 12 months, use the most recent calendar year for which you received some support from a parent.

Self-supporting (Independent) students should complete this table with information about the people you/your spouse will support between July 1, 2016 and June 30, 2017. Include yourself, your spouse, dependent children and only those people who reside with you and receive more than one-half their support from you and will continue to live with and receive this support through June 30, 2017.

Summarize your family information here:

A. Household size (Number must equal the number listed in the table below) …………………………………………………
B. Number of eligible family members* in college (including yourself) …………………………………………………

*Family members who are enrolled on at least a half-time basis from July 1, 2016 through June 30, 2017 in a degree-seeking program and are either: a) your siblings/step-siblings, b) your spouse, or c) dependent children of self-supporting students, are considered eligible family members in college. Federal regulations prohibit the inclusion of parents/step-parents as eligible family members in college.

<table>
<thead>
<tr>
<th>First Name</th>
<th>Age</th>
<th>Relationship to Student (parent, sibling, spouse, etc.)</th>
<th>Name of College to be Attended in 2016–2017†</th>
<th>Year in College in 2016–2017 (If Applicable)</th>
<th>Dependency Status††</th>
</tr>
</thead>
<tbody>
<tr>
<td>You, the Student</td>
<td>Self</td>
<td>Case Western Reserve</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

C. Dependent Students Only: Marital status of parent(s) on the date you filed the FAFSA (include step-parent if applicable)

D. Independent Students Only: Your marital status on the date you filed the FAFSA

Is employer tuition reimbursement received? yes no $ ____________00

VI. Certification and Signatures

This form must be signed by the student (and spouse, if married) and by one parent if the student is dependent. The undersigned certify that all of the information on this form is complete and correct. The student certifies that he/she has never been convicted of the manufacture, possession, sale, or distribution of an illegal controlled substance.

Date _____ / _____ / _______

Parent 1 Signature

Date _____ / _____ / _______

Parent 2 Signature

For dependent students and Dental students only

Date _____ / _____ / _______

Parent 1 Signature

Date _____ / _____ / _______

Parent 2 Signature