

Verification Worksheet for Dependent 2024-2025 Aid Applicants

Student's Name: _____ Student ID: _____

The Verification Worksheet is required if your FAFSA was selected for verification by the Federal Student Aid Program, or if Student Financial Services determines the form is needed to clarify application information. Complete all sections of this worksheet **including required signature(s)**.

Parents' Household Information

- For financial assistance purposes, the household always includes you the student, even if you do not live with your parents.
- Include the parent or parents who provided FAFSA data and their dependent children only if those children receive more than half of their support from your parent(s), or if they would be required to provide parental information when applying for Federal Student Aid.
- Include other people only if they lived with and received more than half of their support from your parent(s) at the time you completed your application and will continue to get this support between July 1, 2024, and June 30, 2025.

In the spaces below, list all the people in the household, **starting with yourself and including your parents**. List the colleges of siblings who will be enrolled at least half time in a degree-granting college during the full 2024-2025 academic year.

If your sibling will be enrolled for only one semester during the academic year or in different schools within the same academic year, please notify Student Financial Services.

Full Name	Age	Relationship to Student	College (if enrolled)	Undergrad or Grad	Full or Half Time
<i>Example: Flex Falcon</i>	<i>19</i>	<i>Self</i>	<i>Bentley</i>	<i>Undergrad</i>	<i>Full Time</i>

Untaxed Income Information

Report untaxed income and benefits received in calendar year 2022 by you (and your spouse if married) in the first column, and for your parent(s) in the second column. **If you received no income of a certain type, enter \$0 on that line.** Do not leave any item blank.

Student Parent(s)

		Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 form in Boxes 12a-d, codes D, E, F, G, H, and S. Don't include amounts reported in code DD (employer contributions toward employee health benefits).
\$	\$	
\$	\$	Child support received for all children. Don't include foster care or adoption payments.
\$	\$	
\$	\$	Welfare benefits, including Temporary Assistance for Needy Families (TANF). Don't include food stamps or subsidized housing.
\$	\$	
\$	\$	Untaxed portions of pensions from IRS tax return. Exclude rollovers. If negative, enter a zero here.
\$	\$	
\$	\$	Untaxed portion of IRA distributions from IRS tax return. Exclude rollovers. If negative, enter zero here.
\$	\$	
\$	\$	Social Security benefits received for all household members (as reported in parent's household on this form) that were not taxed (such as SSI). Report benefits paid to parents in the Parents column and benefits paid directly to student in the Student column.
\$	\$	
\$	\$	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).
\$	\$	
\$	\$	Veterans' non-education benefits, such as Disability, Death Pension or Dependency and Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.
\$	\$	
\$	\$	Other untaxed income or benefits not reported elsewhere, such as worker's compensation, untaxed portions of Railroad Retirement Benefits, Black Lung Benefits, disability, etc. Tax filers only: report combat pay not included in AGI. Don't include student aid, Workforce Investment Act educational benefits, non-tax filers' combat pay if you are not a tax filer, or benefits from flexible spending arrangements, e.g., cafeteria plans.
\$	\$	
\$	\$	Money received or paid on your behalf (e.g. bills), otherwise not reported on this form. This includes money that you received from a parent whose financial information is not reported on this form and that is not part of a legal child support agreement. Also, include any distributions to the student from a 529 plan owned by someone other than the student or the student's parents.

Outside Scholarships and Other Resources

The federal government requires that you inform Student Financial Services of any grants, scholarships or other education benefits you will receive for the 2024-2025 academic year from sources outside of Bentley such as your high school, civic groups, vocational rehabilitation programs, etc.

Will you be receiving any outside scholarships or education benefits for the 2024-2025 academic year?

☐ Yes ☐ No

If yes, please list the source(s) and total amount(s) below:

Source: _____ Amount: \$ _____ Renewable? ☐ Yes ☐ No

Source: _____ Amount: \$ _____ Renewable? ☐ Yes ☐ No

Source: _____ Amount: \$ _____ Renewable? ☐ Yes ☐ No

Certification and Signature(s)

By signing this worksheet, I/we certify that all the information reported to qualify for federal student aid is complete and correct. One parent who provided FAFSA data is also required to sign. Signatures must be in ink (not typed).

Student Name (printed)

Student Signature (cannot be typed)

Date

Parent Name (printed)

Parent Signature (cannot be typed)

Date

Student Financial Services