



2020-2021 Verification Worksheet for Dependent Students

Student Name: _____ **Stonehill ID:** _____

Student Cell Number: _____ **Cell Phone Carrier (i.e. AT&T):** _____

I, the Student, give permission to Student Financial Assistance to send me text messages for important notifications. Y __ N __

Please complete the Free Application for Federal Student Aid (FAFSA) at fafsa.gov prior to submitting this form. This form should be completed by you, the student, and by your custodial parent(s). Enter zero 0 or not applicable (N/A) where appropriate. DO NOT LEAVE ANY ITEM BLANK

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: _____

I, the Custodial Parent, give permission to Student Financial Assistance to send me text messages for important notifications.
 Y __ N __

2. Household Information

List below all persons who are living in your custodial parents' household. If more than 6 people, attach a separate page.

- Your custodial parent(s), and
- Your custodial parents' other children if your parent(s) will provide more than half of their support between July 1, 2020 and June 30, 2021 or if the other children would be required to provide information about your custodial parent(s) when completing the FAFSA for 2020-2021, and
- Other people if they now live with your parents and your parents provide more than half of their support and will continue to do so from July 1, 2020 through June 30, 2021

Full Name	Relationship to student	Date of birth	College this person will attend in academic year 20-21, if any	Number of credits per semester in 20-21	Student Enrolled in Graduate School (Yes or No)
1. You, the student	-----	-----	Stonehill College	-----	-----
2.	Parent 1/Stepparent 1		-----	-----	-----
3.	Parent 2/Stepparent 2		-----	-----	-----
4.					
5.					
6.					

3. Sources of Untaxed Income and Benefits in 2018 (Enter Ø if not applicable)

Enter (Ø) if not applicable.	Student	Parent
Child support received (total for ALL children in household)	\$ -----	\$
Worker's Compensation	\$	\$
Untaxed contributions to retirement – Refer to W-2s, Boxes 12a through 12d, codes D,E,F,G,H, & S and 1040 Schedule 1, line 28 and 32	\$	\$
Welfare benefits (e.g. TANF) and untaxed Social Security benefits	\$	\$
Bills paid on your behalf by a third party	\$	\$
Social Security Disability Income or Veterans' benefits	\$	\$

4. Child Support Paid in 2018

Did one or both of the student's parents listed in Section 2 of this worksheet pay child support in 2018? 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 2018
			\$
			\$

5. Custodial Parent Property Information

Property Description	Principal Residence <input type="checkbox"/> Rent <input type="checkbox"/> Own (check one)	Other 1*	Other 2*
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. If more than 2 properties are owned, please include the details on a separate page.

6. Custodial Parent Business Information

Is either parent self-employed? Yes No If yes, please complete the following information.

Name of Business: _____ Type of Business Return Filed: 1065 1120S 1120 Schedule C

If there is more than 1 business, please include these details on a separate page. Include student ID and name on page.

Name of all owners, including parent(s)	% owned by you	Relationship to you	Your share of Value of Business	Your share of Debt of Business	# of FTE Employees
			\$	\$	
			\$	\$	
			\$	\$	

7. Permission to Discuss Award

If you wish to give us permission to discuss your financial aid information with someone other than yourself and your 2018 custodial parent(s) please indicate below:

Name: _____ Relationship: _____

8. Certification Statements

Financial aid cannot be finalized prior to submission of this Verification Worksheet. If your file is selected for verification by the College or the Federal Government, you will be required to submit additional documents.

By my signature, I certify that all information submitted on this Verification Worksheet is complete and accurate.

Student's Signature: _____ Custodial Parent's Signature: _____ Date: _____

Please return in PDF format to finaid@stonehill.edu (enter Student name and Stonehill ID in the subject line) or mail to Student Financial Assistance, Stonehill College, 320 Washington Street, Easton, MA 02357. Photographed documents sent via email will not be accepted. Please note that a scanner is available for use in the Stonehill College library.