OUWB Financial Services
E-Mail: medfinservices@oakland.edu
Phone: (248) 370-3611
Fax: (248) 370-4276

2017-2018 OUWB Verification Worksheet

A. Student's Information

Last Name	First Name	M.I.	Grizzly ID (G#)

Street Address (include apt. no.)	Date of Birth

City	State	Zip Code	Primary Phone Number

B. Student's Family Information

In the list below, include the following members of your household:

1. Yourself
2. Your parent(s) listed on the FAFSA.
3. Your parent's children, if any, if your parent(s) will provide more than half of their support from July 1, 2017, through June 30, 2018, or if the child would be required to include parent information if they were completing a FAFSA for 2017-2018. Include children who would meet either of these standards, even if they do not currently live with your parent(s).
4. Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2018.

First and Last Name	Age	Relationship	College or University	Will be Enrolled at Least Half Time (Y or N)?
		Self	*Oakland University*	

C. Tax Information

Student Tax Information:

☐ I used the IRS Data Retrieval Tool (IRS DRT) to electronically transfer 2015 tax information to the FAFSA.

☐ I am unable or choose not to use the IRS DRT. I have attached a physical copy of my 2015 IRS Tax Return Transcript.

☐ I filed an amended 2015 tax return or an extention and will submit my 1040X or IRS 4868 form along with my W2(s) to Financial Services.

☐ I have not, will not, and am not required to file a 2015 Income Tax Return. I have listed my income below and have attached my W2(s) to support the information provided. 2015 Total income from work $_____

Parent/Step-Parent Tax Information: *(if required)*

☐ I used the IRS DRT to electronically transfer 2015 tax information to the FAFSA.

☐ I am unable or choose not to use the IRS DRT. I have attached a physical copy of my 2015 IRS Tax Return Transcript.

☐ I filed an amended 2015 tax return or an extention and will submit my 1040X or IRS 4868 form along with my W2(s) to Financial Services.

☐ I have not, will not, and am not required to file a 2015 Income Tax Return. I have listed my income below and have attached my W2(s) to support the information provided. 2015 Income from Work $_____

D. Additional Information

1. Did anyone in your household receive Food Stamps/SNAP benefits in 2015 or 2016?
   ☐Yes. (*Attach documentation naming all household members who received benefits.*)
   ☐ No.
2. Did your parent(s), listed in your household above, pay child support in 2015?
   ☐Yes. (*Attach Friend of the Court documentation indicating all benefits paid.)*
   ☐ No.

E. Certification and Signatures: Each person signing this worksheet certifies that all information reported is complete and correct.

_____ _____

Student Signature Date

_____ _____

Parent Signature Date