



NORTH GREENVILLE UNIVERSITY

Christ Makes the Difference

2017-18 INDEPENDENT VERIFICATION WORKSHEET

Student's Last Name /First Name/Middle Initial

Student's Social Security Number

Your 2017-18 financial aid application has been selected for a review process called "verification." Federal law requires the applicant and his/her family to participate in the verification process

Please list below the people you will support between July 1, 2017 and June 30, 2018.

Include:

1. Yourself
2. Your spouse (if applicable)
3. Other people **ONLY** if they live with you (and your spouse) and receive more than half their support from you (and your spouse) now **AND** will continue to receive this support through June 30, 2018.

Full Name of Family Member in Your Household	Relationship to Student	Age	Name of College/University in 2017-18

Please check box if applicable:

- The student and spouse were not employed and had no income earned from work in 2015.

Student's signature REQUIRED

Date

Spouse's signature OPTIONAL

Date