PEPPERDINE UNIVERSITY
Graziadio School of Business and Management

2016–2017 V1 Standard Verification Worksheet
Independent Student

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

Section 1 - Student's Information

_____   _____

Student's Last Name   First Name   Campus Wide ID (CWID)

_____   _____

Student's Street Address (include apt. no.)   Student's Date of Birth

_____   _____

City State Zip Code   Student's Email Address

_____   _____

Student's Home Phone Number (include area code)   Student's Alternate or Cell Phone Number

Section 2 - Student's Family Information

In the table below list the people in your household. Include:
- Yourself.
- Your spouse, if you are married.
- Your children if you or your spouse will provide more than half of their support from July 1, 2016, through June 30, 2017, even if the children do not live with you.
- Other people if they now live with you and you or your spouse provides more than half of your support and will continue to provide more than half of your support through June 30, 2017.

For any household member who will be enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2016, and June 30, 2017, include the name of the college.
If more space is needed, provide a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)
		Self	*Pepperdine University*	

Student's Name: _____ CWID _____

Note: *We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.*

Section 3 - Receipt of SNAP Benefits

Did you or anyone in your household receive benefits from Supplemental Nutrition Assistance Program (SNAP) sometime during 2014 or 2015? SNAP may be known by another name in some states.

☐ Yes

☐ No

If answered "Yes" list the name of the person who received SNAP benefits _____

Note**:** *If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2014 or 2015.*

Section 4 - Child Support Paid

Did you or your spouse (if married) pay child support in 2015?

☐ Yes

☐ No

If yes, please, provide the following information:

If more space is needed, provide a separate page that includes the student's name and ID number at the top.

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 2015

Note: *If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation, such as:*

- *A signed statement from the individual receiving the child support certifying the amount of child support received; or*
- *Copies of the child support payment checks or money order receipts.*

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct.
The student must sign and date.

<div style="border:1px solid">

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

</div>

_____   _____
Print Student's Name   Campus Wide ID (CWID)

_____   _____
Student's Signature (Required)   Date

_____   _____
Spouse's Signature (Optional)   Date

Send completed and signed document to gsbmfinancialaid@pepperdine.edu or submit via fax to (310) 568-2364