PEPPERDINE UNIVERSITY Graziadio School of Business and Management

2017–2018 V1 Standard Verification Worksheet Dependent Student

Your 2017–2018 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 and a parent whose information was reported on the FAFSA 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 - Dependent Student's Information

Student's Last Name	First Name	Campus Wide ID (CWID)	
Student's Street Address (i	nclude apt. no.)	Student's Date of Birth	
City State Zip Code		Student's Email Address	
Student's Home Phone Nu	mber (include area code)	Student's Alternate or Cell Phone Number	

Section 2 - Dependent Student's Family Information

List the people in your parents' household. Include:

- Yourself.
- Your parent(s) (including a stepparent) even if you don't live with the parents.
- Your parents' other children, even if they don't live with your parent(s), if
 - o your parents will provide more than half of their support from July 1, 2017, through June 30, 2018,
 - o the children would be required to provide parental information when completing a FAFSA for 2017-2018.
- Other people if they now live with your parents and your parents provide <u>more than half of</u> their support and will continue to provide more than half of their support through June 30, 2018.

Include below information about any household member, *excluding the parents*, 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, 2017, and June 30, 2018, 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	(105 01 110)
	'e may require additional docume				
Section 3 - Signatures Required Each person signing below certifies that all of the information reported is complete and correct.			the	WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.	
The st	udent and one parent whose ed on the FAFSA must sign	e information	n was	<u> </u>	
Print St	tudent's Name		Campus Wide	e ID (CWID)	

_____CWID _____

Student's Name: ____

Parent's Signature

Date