

Quality Assurance Independent Verification Document 2008-2009

We are requesting you verify the information reported on your financial aid application. Please follow the instructions carefully and return all requested documentation to the Office of Student Financial Services as soon as possible. If you have already provided this office with any of the requested documents, please note it next to the appropriate place on this form. **We will not be able to provide financial aid if you fail to return the required institutional Verification Document and complete this verification process.** If you have any questions concerning this process, please contact the Office of Student Financial Services at (609) 896-5360. Please print clearly.

PART ONE: Student Information

_____			_____
Name (last name, first name, middle initial)			Social Security No.
_____			_____
Address			Phone (123) 456-7890
_____			_____
City	State	Zip Code	Date of Birth

PART TWO: Student Status

1. Were you (the student) born before January 1, 1985? YES NO
2. Are you a veteran of the U.S. Armed Forces or are you currently serving on active duty in the U.S. Armed Forces for purposes other than training?
(Answer "no" if you are currently an ROTC student or a cadet or midshipman at a service academy, or are a National Guard or Reserves enlistee activated only for training.)
If YES, attach a copy of VA Form DD214. YES NO
3. At the beginning of the 2008-2009 school year, will you be enrolled in a graduate or professional program (beyond a bachelor's degree) ? YES NO
4. Are you married? YES NO
5. Are both of your parents deceased? If YES, please complete the following: YES NO

<u>Name of Parent</u>	<u>Date of Death</u>
_____	_____
_____	_____
6. Are you a ward/dependent of the court, or were you a ward/dependent of the court until age 18? If YES, attach documentation of the court ruling. YES NO
7. Do you have legal dependents other than a spouse who live with you **and receive more than half of their support from you**? If YES, be sure to list your dependents in PART THREE. YES NO

If you answered **YES** to any of the above questions, go to **PART THREE**.
If you answered **NO** to all of these questions, **STOP**. You have the wrong document.
Please contact the Office of Student Financial Services for the correct form.

PART THREE: Information About Family Members

In the space provided below, list **all** the people in your household. Be sure to include:

- **yourself**, and your spouse if you have one, and
- your children, if you will provide more than half of their support from July 1, 2008 through June 30, 2009, and
- other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2008 through June 30, 2009.

Write the names of **all** household members in the spaces(s) below. Also write in the names of the college for any household member who will be attending college at least half time between July 1, 2008 and June 30, 2009, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page. College enrollment is subject to verification.

Name of Family Member	Relationship to Student	Age	College in 2008-2009	Will attend at least half time (6 credits)	Expected Year of Graduation
<i>John Doe</i>	<i>Self</i>	<i>18</i>	<i>Rider Univ.</i>	<i>Yes</i>	<i>2012</i>

PART FOUR: Student Federal Tax Information

Did or will you (or your spouse if you have one) file a federal income tax return for 2007? YES NO
 (IRS form 1040, 1040A, 1040EZ, or appropriate form from country of residence)

If YES, attach a **signed** photocopy of your (and your spouse's) federal tax return, **including all pages, supporting schedules and W-2's**. If separate tax returns were filed, attach a **signed** copy of each return. **All tax returns provided to Rider University must have a signature**, even if the signature was not required for submission to the Internal Revenue Service (IRS). If you (and/or your spouse) did not keep a copy, request a copy of the actual return from the regional office of the IRS (form 4506) or from your tax preparer.

If NO, list below all your (and your spouse's) sources and amounts of income (if any) received in 2007 and **sign** the following statement:

EMPLOYER/SOURCE OF INCOME	AMOUNT RECEIVED
_____	\$ _____
_____	\$ _____

I certify that I DID NOT, I WILL NOT, and I AM NOT REQUIRED TO file a federal tax return for 2007.

 Student's signature _____
Date

 Spouse's signature _____
Date

PART FIVE: Student Federal Work-Study Income for 2007

Did you participate in the Federal Work-Study program during 2007? YES NO

If YES, complete the following:

Income earned through the Federal Work-Study program in 2007: \$ _____

PART EIGHT: Asset Information

You **must** complete this part if you have any cash, savings, checking accounts, investments, or if you own a business. Investments include real estate (excluding your home), trust funds, UGMA and UTMA accounts, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, Coverdell savings accounts, 529 college savings and prepaid tuition plans, installment and land sale contracts including mortgages held, commodities, etc. Do **not** include the value of your primary residence (home) except for any rental portion that is not owner occupied. Do **not** include the value of life insurance or retirement plans (pension funds, annuities, noneducation IRAs, Keogh plans, etc.). **Investment value** means the current balance or market value of these investments. **Investment debt** means only those debts directly related to the investments. **Business value** includes the value of the land, buildings, machinery, equipment and inventory. **Business debt** means only those debts for which the business was used as collateral.

Student & Spouse Value/Debt

Total balance in cash, savings and checking accounts:

\$ _____

Investment 1: _____

Value \$ _____ Debt \$ _____

Investment 2: _____

Value \$ _____ Debt \$ _____

Business 1: _____

Value \$ _____ Debt \$ _____

Business 2: _____

Value \$ _____ Debt \$ _____

Farm: _____

Value \$ _____ Debt \$ _____

PART NINE: Certification

Please check this form for accuracy and completeness. This form will be returned to you if incomplete and/or if documents are missing.

WARNING: IF YOU PURPOSELY GIVE FALSE OR MISLEADING INFORMATION ON THIS FORM, YOU MAY BE FINED, SENTENCED TO JAIL, OR BOTH.

By signing this form, I (we) certify that all the information reported on it is complete and correct.

Student's signature

Date

Spouse's signature

Date

Did you remember to . . .

- Complete all items?
- Include a signed copy of the federal tax return(s) with all pages, supporting schedules and W-2's?
- Provide all other required documentation?
- Sign the document?