Your Free Application for Federal Student Aid (FAFSA) was selected for a process called “Verification.” In this process, Niagara University will compare information from your FAFSA with information provided on this worksheet, as well as other financial documents that will be requested. If there are any differences between your FAFSA information and your financial documents, our office will make corrections electronically to your application. The law states that we have the right to ask you for this information before disbursing any of your Federal Aid.

Please complete this form in its entirety and submit it to the Financial Aid Office as soon as possible. Your financial aid administrator will help you if you have any questions.

A. Dependent Student’s Information

<table>
<thead>
<tr>
<th>Student’s Last Name</th>
<th>First Name</th>
<th>M.I.</th>
<th>NU ID Number (or Social Security Number)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Street Address (include apt. no.)</th>
<th>Date of Birth</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Email Address</th>
</tr>
</thead>
</table>

Phone Number (include area code)

B. Child Support Paid

Did your parent(s) **PAY** child support for the year 2012?

☐ YES

☐ NO

If you answered YES, please complete the following chart:

<table>
<thead>
<tr>
<th>Name of Person Who Paid Child Support</th>
<th>Name of Person to Whom Child Support was Paid</th>
<th>Name of Child for Whom Support Was Paid</th>
<th>Amount of Child Support Paid in 2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>(example)Robert Jones</td>
<td>Mary Smith</td>
<td>Terry Jones</td>
<td>$6,000.00</td>
</tr>
</tbody>
</table>

|                               |                                             |                                        |                                     |
|                               |                                             |                                        |                                     |
|                               |                                             |                                        |                                     |

|                               |                                             |                                        |                                     |
|                               |                                             |                                        |                                     |
C. Food Stamps/Supplemental Nutrition Assistance Program (SNAP)

Complete this section if someone in your parent(s)’ household received Food Stamp/SNAP Benefits in the 2011 or 2012 calendar year.

Check only ONE box below.

☐ YES, one of the persons in my household received Food Stamp/SNAP benefits in 2011 and/or 2012

☐ NO, none of the persons in my household received Food Stamp/SNAP benefits in 2011 and/or 2012

G. Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct.

The student AND parent must sign this worksheet.

__________________________________________________________________________
Student’s Signature

__________________________________________________________________________
Parent’s Signature

__________________________________________________________________________
Date

__________________________________________________________________________
Date

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

REMINDER: Until this form and the requested verification documentation are received and reviewed, no federal aid can be disbursed to the Student Account.

If corrections are necessary upon completion of verification, an award letter will be sent to you after the corrections have been made.

Return within 14 days of receipt of this request to:

Financial Aid Office
Butler Building
PO Box 2010
Niagara University, NY 14109

FAX: (716) 286-8678
EMAIL: finaid@niagara.edu