


**PURPOSE**

The Graduate Verification of Information Form will be used to verify the information submitted on your Free Application for Federal Student Aid (FAFSA).



- Do not fill this form out unless it has been requested by the Financial Aid Office.
- If you fill this form out incorrectly, or before you are asked, you will be required to complete it again and you may lose aid due to the delay in processing your file.
- If you are a **Teaching Credential** student, **DO NOT** fill out this form. You must fill out the Undergraduate Verification of Information Form.

**BASIC INFORMATION**

Please use your full name (as it appears on your Social Security Card), Biola ID# (if known), Social Security Number, and complete permanent address.

.....  
Student Name Biola ID#

.....  
Social Security # Permanent Phone #

.....  
Permanent Address (Include APT. #)

.....  
City (& country if not in U.S.) State Zip Code

**ENROLLMENT PLANS**

Degree Program (choose all that apply):

- |                                   |   |   |
|-----------------------------------|---|---|
| <input type="checkbox"/> Talbot   | <input type="checkbox"/> Internship             | <input type="checkbox"/> Masters of Education (Does not include Teaching Credential Students) |
|                                   |   | <input type="checkbox"/> Off Campus (Inglewood, etc.)   |
| <input type="checkbox"/> ICS      | <input type="checkbox"/> Dissertation           | <input type="checkbox"/> On Campus  |
| <input type="checkbox"/> Rosemead | <input type="checkbox"/> Masters of Apologetics |   |
|                                   |   | <input type="checkbox"/> Off Campus   |
| <input type="checkbox"/> M.O.L.   |   | <input type="checkbox"/> On Campus  |
| <input type="checkbox"/> MBA      |   |   |

**FALL:**

- Enrollment:  Full-time (9+ units)     3/4 time (7-8 units)     1/2 time (5-6 units)     Less than 1/2 Time (4 units or less)     Not Attending
- Housing:  Living On-Campus     Living with Parents     Living Off-Campus

**SPRING:**

- Enrollment:  Full-time (9+ units)     3/4 time (7-8 units)     1/2 time (5-6 units)     Less than 1/2 Time (4 units or less)     Not Attending
- Housing:  Living On-Campus     Living with Parents     Living Off-Campus

Expected date of college graduation:.....

**IMPORTANT: PLEASE DO NOT LEAVE ANY SPACES BLANK**

If a question does not apply to you, please indicate by filling the blank with a zero (0) dollar amount.

**WORKSHEETS A, B, AND C****WORKSHEET A**

Student/Spouse	Calendar Year 2006
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Earned income credit from IRS Form 1040-line 66a; 1040A-line 40a; or 1040EZ-line 8a.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Additional child tax credit from IRS Form 1040-line 68 or 1040A-line 41.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Welfare benefits, including Temporary Assistance for Needy Families (TANF). Don't include food stamps or subsidized housing.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Social Security benefits received, for all household members as reported in the Family Size Verification section that were not taxed (such as SSI).
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	<b>TOTAL</b>

**WORKSHEET B**

Student/Spouse	Calendar Year 2006
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a - 12d, codes D, E, F, G, H, and S.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh payments and other qualified plans from IRS Form 1040-line 28 + line 32 or 1040A-line 17.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Child support <b>received</b> for all children. Don't include foster care or adoption payments.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Tax exempt interest income from IRS Form 1040-line 8b or 1040A-line 8b.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Foreign Income Exclusion from IRS Form 2555-line 45 or 2555EZ-line 18.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Untaxed portions of IRA distributions from IRS Form 1040-lines (15a minus 15b) or 1040A-lines (11a minus 11b). Exclude rollovers. If negative, enter zero here.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Untaxed portions of pensions from IRS Form 1040-lines (16a minus 16b) or 1040A-lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Credit for federal tax on special fuels from IRS Form 4136-line 20 (nonfarmers only).
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Housing, Food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Veterans' non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Any other untaxed income or benefits not reported elsewhere on Worksheets A and B, such as worker's compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, disability, etc. Tax filers only: report combat pay not included in AGI. <b>DON'T INCLUDE:</b> student aid, Workforce Investment Act educational benefits, combat pay if you are not a tax filer, or benefits from flexible spending arrangements (e.g. cafeteria plans).
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Money <b>received</b> , or paid on your behalf (e.g. bills), not reported elsewhere on this form.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Source(s) of cash received (i.e. loan and/or gift from friends, relatives - excluding parents-etc.).
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	<b>TOTAL</b>

**WORKSHEET C**

Student/Spouse	Calendar Year 2006
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040-line 50 or 1040A-line 31.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Child support you paid because of divorce or separation or as a result of a legal requirement. Don't include support for children in your household if they are listed as a child or dependent in the Family Size Verification section.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Taxable earning from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	Student grant and scholarship aid reported to the IRS in your adjusted gross income. Includes AmeriCorps Benefits (awards, living allowances, and interest accrual payments), as well as grant or scholarship portions of fellowships and assistantships. Do not include any financial aid awarded through Biola.
\$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/>	<b>TOTAL</b>

DO NOT LEAVE ANY SPACES IN WORKSHEETS A, B, OR C BLANK

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## FAMILY SIZE VERIFICATION

Please use the following chart to provide your household information.

**Please include:**

- Yourself
- Your spouse, if applicable.
- Your dependents (children or other individuals who live with you) if you will provide more than half of their support from July 1, 2007 through June 30, 2008.

Name(s)	Age	Relationship	Full name of 2007-2008 College	Enrollment Status
Example: John Smith	18	Self	Biola University	Half-time

(Please complete a **Sibling/Dependent Support Statement Form** for each dependent listed above that is age 24 or older, excluding a spouse.)

## STATEMENT OF NON-FILING

**STUDENT AND SPOUSE:**

- I/We filed a 2006 tax return. **STOP!! Do not complete the rest of this section!!**
- I/We did not and was/were not required to file a 2006 Federal Income Tax return.

List any wages earned in 2006 below. Do not list monetary gifts. **If you received 2006 W2's and/or 1099's from an employer, attach copies of them to this form.**

Student Income Source(s) ..... \$  
Amount

Spouse Income Source(s) ..... \$  
Amount

## HOME VALUE AND DEBT

- If you are a homeowner, list the value and debt of your home.
- I am not a homeowner.

\$ ..... \$  
Current Home Market Value Purchase Price

\$ .....  
Current Home Debt Date of Purchase

## SIGNATURE

 **PLEASE SIGN AND RETURN THIS COMPLETED FORM TO THE FINANCIAL AID OFFICE.** Failure to do this will delay your financial aid process. Unsigned and incomplete forms will be returned unprocessed.

I verify that the information on this form is true and complete.