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| |  |  |  | | --- | --- | --- | | http://creative.jefferson.edu/wp-content/uploads/2017/08/jeff-email-signature.jpg | **2018-2019 Verification Worksheet**  **V1 & V5** |  | |

Your 2018-2019 FAFSA was selected for review in a process called Verification. Before awarding you Federal Student Aid, the Financial Aid Office is required to confirm the following information below.

Name: Click here to enter text.

Campus Key: Click here to enter text.

**Section A: “Student/Family Information”**

Please list the people that you (and your spouse, if applicable) will support between July 1, 2018 and June 30, 2019. Include yourself, your spouse, your dependent children and other individuals (if you provide more than half of their support). Also write in the name of the college for any family member who will be enrolled in a degree or certificate program at least half time between July 1, 2018 and June 30, 2019.

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| --- | --- | --- | --- |
| **Full Name** | **Age** | **Relationship** | **College** |
| Click here to enter text. |  | Self | Thomas Jefferson University |
| Click here to enter text. |  | Click here to enter text. | Click here to enter text. |
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**Section B: “Your Parent/Family Information” (only to be completed if you are dependent)**

Please list the people that your parent(s) will support between July 1, 2018 and June 30, 2019. Include your parent(s), dependent children (if your parent(s) provide more than half of their support), and as always include yourself. Include other people as part of your parent’s family only if they lived with your parents and received more than half support from your parents at the time your student aid application was completed. Also, write in the name of the college for any family member who will be enrolled in a degree or certificate program at least half time between July 1, 2018 and June 30, 2019.

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| --- | --- | --- | --- |
| **Full Name** | **Age** | **Relationship** | **College** |
| Click here to enter text. |  | Click here to enter text. | Click here to enter text. |
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By agreeing to this application, I certify that the information provided is true and accurate to the best of my knowledge. I acknowledge that any misrepresentation of information will nullify my application for financial aid and, if enrolled, will result in disciplinary action.

I Agree

**Signature:** Click here to enter text. **Date:** Click here to enter a date.