



**Undergraduate Financial Aid**

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**Verification Update Form (Independent)  
2018–19 Academic Year**

**Student Information**

Name: \_\_\_\_\_ Class: \_\_\_\_\_

PUID: \_\_\_\_\_

**Section I. Student Income Information.** Check the appropriate answer.

- The student logged into the 2018-19 FAFSA and used the IRS Data Retrieval Tool to transfer their 2016 IRS student income information into the student's FAFSA on the Web.
- A copy of the 2016 IRS Tax Return Transcript is attached. **NOTE: Do not attach a copy of the income tax return. You must visit [www.irs.gov](http://www.irs.gov) or call 1-800-908-9946 to request the IRS Tax Return Transcript.**
- The student did not file a tax return. A copy of the [2018-19 Non-filer Statement](#), 2016 W-2 statements, and 2016 IRS Verification of Non-filing Letter are attached or have already been submitted.

**Section II. Household Information.** Fill in the information about the household members attending a college or university on a half-time basis or more. Indicate the name of the school and the enrollment status. Attach a separate sheet if needed.

**Include:**            **yourself**  
                         **your spouse, if married**  
                         **your children**—even if they do not live with you—if you will provide more than half of their support from July 1, 2018, through June 30, 2019.

**Include others only if they live with you and you provide more than half of their support through June 30, 2019.**

Full Name	Age	Relationship	College (in 2018-19)	Enrollment Status
		Self	Princeton Univ.	Full-time

**Indicate below the amount of child support paid in 2016 to another household you or, if married, your spouse:**

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support was Paid	Amount of Child Support Paid in 2016

**Indicate below if one of the persons listed above or on an attached sheet received SNAP benefits in 2016 or 2017.**

- Yes, and if asked, documentation of SNAP benefits will be provided
- No household member received SNAP benefits

*We certify that the information on this statement is complete and accurate.*

\_\_\_\_\_  
Student's Signature                      Date                      Spouse's Signature                      Date