

Student ID #:

2016-2017 Verification Worksheet Independent Student – Tracking Group V5

Your 2016-2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your spouse reported on your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

Complete **both sides** of this form.

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Last Name	First Name	M.I	Student ID
Street Address	City	State	Zip Code
Date of Birth	Cell Phone	Home Phone	
Email			

B. FAMILY INFORMATION

List the people in your household, include:

- Yourself and your spouse, if applicable, and
- Your and your spouse's **children** if, you and your spouse will provide more than half of their support from July 1, 2016 through June 30, 2017, even if the children do not live with you, and
- Other people if they now live with you and your spouse and you and your spouse provides more than half of their financial support and will continue to provide more than half of their support from July 1, 2016 through June 30, 2017.

Also write in the name of the college for any household member who will be attending at least half-time between July 1, 2016 and June 30, 2017, and will be enrolled in a degree, diploma, or certificate program at an eligible postsecondary educational institution. If you need more space, attach a separate page.

Household Member: Full Name	Age	Relationship to Student	Current College or University	Will be Enrolled at Least Half Time?
		Self		

C. HOUSEHOLD INCOME INFORMATION AND TAX FILING STATUS Please select <u>ONE</u> box only:

I (the student and spouse, if applicable) have already filed and used the IRS Data Retrieval tool on my FAFSA for 2015 income.
I (the student and spouse, if applicable) have already filed and I did not use the IRS Data Retrieval tool and I am attaching my 2015 Tax Return Transcript which I obtain from IRS directly (no Income Tax Returns would satisfy this requirement).
\Box I (the student and spouse, if applicable) was employed in 2015 but am not required to file a 2015 Income Tax Return with the IRS. (Submit W-2's and/or 1099s).
[I (the student and spouse, if applicable) was not employed and had no income earned from work in 2015.



D.

Education that Works	Student ID #:
	NFORMATION TO BE VERIFIED Nutrition Assistance Program or SNAP (formerly known as food stamps)
☐ Yes ☐ No	One of the persons listen in Section B of this worksheet received SNAP (formerly food stamps) benefits in 2014 or 2015. I will provide documentation of the receipt of SNAP benefits if requested.
Child Support	Payments
☐ Yes ☐ No	One of the persons listed in Section B of this worksheet paid child support in 2015 and I have completed the information below. I will provide documentation of the payment of child support if requested

Name of Person Who <u>PAID</u> Child Support	Name of Person Who <u>Received</u> the Child Support	Name of Child for Whom Support was Paid	Child's Age	Amount of Child Support <u>PAID</u> in 2015
Marty Jones (example)	Chris Smith (example)	Terry Jones (example)	1	\$6,000.00

E. HIGH SCHOOL COMPLETION STATUS

Provide **ONE** of the following documents that indicate the student's high school completion status when the student will begin college in 2016–2017: Check the box of the document you will attach to this worksheet.

The student must submit the original copy; the school will retain a copy for their records.
A copy of the student's high school diploma.
A copy of the student's final official high school transcript that shows the date when the diploma was awarded.
A copy of the student's General Educational Development (GED) certificate, an official GED transcript that indicates the student passed the exam, or a state-authorized high school equivalent certificate.
For students who completed secondary education in a foreign country, a copy of the "secondary school leaving certificate" or other similar document such as evaluation of foreign transcripts.
An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit toward a bachelor's degree.
For a homeschooled student from a state where state law requires the student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.
For a homeschooled student from a state where state law does not require the student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a transcript or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and includes a statement that the

Note: A student who is unable to obtain the documentation listed above must contact the financial aid office.



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F. DOCUMENTATION OF IDENTITY/ STATEMENT OF EDUCATIONAL PURPOSE

In order to complete the verification process, you will need to appear in person at your postsecondary institution and present your valid government issued ID and this verification worksheet to an institutionally authorized financial aid administrator. Your financial aid administrator will need to validate the statement below at the time of submission by maintaining a copy of your photo ID and by providing a signature and date.

	STATEMENT OF EDUCATIONAL PURPOSE:				
	Instructions: The student must sign the Statemen	nt of Educational Purpose in the presence of the institutional official.			
	I certify that I (the student)	am the individual signing this Statement of Educational			
Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes an					
	cost of attending (indicate which CCC college)	for 2016-2017.			
	Student Signature:	Date:			
Note	e: Student must submit an Educational Plan completed	by the Academic Advisor and must only enroll in classes on the Educational Plan.			
	_	emic Advisor at (indicate which CCC College)			
		FOR OFFICE USE ONLY:			
	Financial Aid Officer's Name and Title				
Financial Aid Officer's Signature Document Received Date					
	Check here if the student appeared	in person and presented one of the following documents: Valid State ID, OR Valid Passport			
G. SIGN THIS WORKSHEET The College must review the requested information. Under the financial aid program rules (CFR title 34, Part 668). If you are signing this application you certify that you (1) will use federal and/or state student financial aid only to pay the cost of attending of higher education, (2) are not in default on a federal student loan or have made satisfactory arrangements to repay it, (4) school if you default on a federal student loan and (5) will not receive a Federal Pell Grant for more than one school for the time. If you are the spouse or the student, by signing this application you agree, if asked, to provide information that will verify your completed form. This information may include U.S. or state income tax forms that you filed or are required to file. Also, you understand that the Secretary of Education has the authority to verify the information reported on this application will Revenue Service and other federal agencies. If you sign any document related to the federal student aid programs electron Personal Identification Number (PIN), you certify that you are the person identified by the PIN and have not disclosed that PIN WARNING: If you purposely give false or misleading information on the worksheet, you may be fined \$20,000, sent to prison, or both.					
	Student Signature:	Date:			
	Spouse Signature (Optional):	Date:			

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the financial aid administrator at your school.