

2016-2017 Verification Worksheet Apply for Federal Student Aid at <u>http://www.fafsa.gov/</u>

- 1. Your 2016-2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent, if dependent, whose information was reported on the FAFSA, must complete and sign this verification document, attach any required documents, and submit the form and other required documents to the Office of Student Services. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.
- 2. The instructions below apply to the student and spouse, if the student is married, or student and parents included in the parent'(s) household, if the student is a dependent.

### A. Student Information

Last Name	First Name	Middle	Social Security Number	
Street Address (	include apt. no.)		Date of Birth	
City	State	Zip Code	Email Address	
	umber (include area co	Alternate or Cell Phone Number		

# **B.** Family Information:

## How to determine who should be listed in the household:

## **Dependent Student**

The people in the <u>parents' household</u>, includes:

- The student.
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parents' other children if the parents will provide more than half of the children's support from July 1, 2016, through June 30, 2017, or if the other children would be required to provide parental information if they were completing a FAFSA for 2016-2017. Include children who meet either of these standards, even if the child does not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of the other person's support and will continue to provide more than half of that person's support through June 30, 2017.

## **Independent Student**

The people in the student's household, includes:

- The student.
- The student's spouse, if the student is married.
- The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2016, through June 30, 2017, even if the children do not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of the other person's support and will continue to provide more than half of that person's support through June 30, 2017.

**Number in College:** Include information about any household member who is, or will be enrolled at least half <u>time</u> in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2016, and June 30, 2017, include the name of the college. *DO NOT* include college information for parents.

## Write the names of all household members in the spaces below.

Full Name	Age	Relationship	College Attending	Enrolled at Least Half Time (Yes or No)
		SELF	BEVILL STATE COMMUNITY COLLEGE	

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Student #\_

# C. Receipt of SNAP Benefits

The student certifies that \_\_\_\_\_\_\_, a member of the student/parents' household, received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2014 or 2015. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243). *Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2014 or 2015.* 

# D. Child Support Paid for 2015

(*Independent*) The student or spouse, who is a member of the student's household, paid child support in 2015. (*Dependent*) One of the parents included in the household and/or the student paid child support in 2015. List below the names of the persons who paid child support, the names of the persons to whom the child support was paid, the names of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2015 for each child.

Don't include support for children in the household.

Name of Person Who Paid	Name of Person to Whom	Name of Child for Whom	Annual Amount of Child		
Child Support	Child Support Was Paid	Support Was Paid	Support Paid in 2015		
	\$				

Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation, such as: 1. A signed statement from the individual receiving the child support certifying the amount of child support received; or 2. Copies of the child support payment checks, money order receipts, or similar records of electronic payments having been made.

## 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.

- A copy of the student's high school diploma.
- For students who completed secondary education in a foreign country, a copy of the "secondary school leaving certificate" or other similar document.
- A copy of the student's final official high school transcript that shows the date when the diploma was awarded.
- A state certificate or transcript received by a student after the student passed a State-authorized examination that the State recognizes as the equivalent of a high school diploma (GED test, HiSET, TASC, or other State-authorized examination).
- 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 student who was homeschooled in a state where state law requires the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized equivalent), a copy of that credential.
- For a student who was homeschooled in a state where state law does not require the student to obtain a secondary school completion credential for homeschooling (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 student successfully completed a secondary school education in a homeschool setting.

Student #\_\_\_\_

## F. Identity and Statement of Educational Purpose (To Be Signed at Bevill State)

The student must appear in person at Bevill State Community College to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

## **Statement of Educational Purpose**

I certify that I \_\_\_\_\_\_ am the individual signing this *Statement of* 

Print Student's Name

*Educational Purpose* and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Bevill State Community College for 2016-2017.

Student's Signature

Date

Student's ID Number

BSCC Official

### G. Certifications and Signatures

Each person signing below certifies that all the information reported is complete and correct. If student is Dependent, the student and one parent whose information was reported on the FAFSA <u>MUST</u> sign and date.

Print Student's Name

Student's Signature

Parent's Signature

Student's ID#

Date

Date

<u>WARNING:</u> If you purposely give false or misleading information, you may be fined, sentenced to jail, or both.

 MAIL COMPLETED FORMS TO:

 BEVILL STATE COMMUNITY COLLEGE

 C/O FASCPC

 1411 INDIANA AVENUE

 JASPER, AL 35501

 FAX: 205-221-1841

#### Do not mail this worksheet to the Department of Education.

It is the official policy of the Alabama Department of Postsecondary Education, including postsecondary institutions under the control of the State Board of Education, that no person shall, on the grounds of race, color, handicap, gender, religion, creed, national origin, or age, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment. Bevill State Community College will make reasonable accommodations for qualified disabled applicants or employees.

## Identity and Statement of Educational Purpose (To Be Signed With Notary)

If the student is unable to appear in person at Bevill State Community College to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to a driver's license, other state-issued ID, or passport; and
- (b) The original notarized Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

#### **Statement of Educational Purpose**

I certify that I \_\_\_\_\_\_ am the individual signing this *Statement of Print Student's Name Educational Purpose* and that the Federal student financial assistance I may receive will only be

*Educational Purpose* and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Bevill State Community College for 2016-2017.

Student's Signature

Date

Student's ID Number

#### Notary's Certificate of Acknowledgement

State of	City/County of
On, before me,	, personally appeared,
Printed Name of Signer	_, and proved to me on basis of satisfactory evidence of identification
Type of government-issued photo ID pre	to be the above-named person who signed the foregoing instrument.
WITNESS my hand and official seal (Seal)	Notary Signature
My commission expires on	