# 2018-2019 Verification Worksheet

Apply for Federal Student Aid at http://www.fafsa.gov

**V-1** 

- 1. Your 2018-2019 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.
- 3. The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web at FAFSA.gov. Unless you used the IRS Data Retrieval Tool on FAFSA on the Web, you must request a copy of your 2016 IRS Tax Return Transcript from the IRS. This may be obtained through:
  - Get Transcript by MAIL Go to www.irs.gov, under the Tools heading, click "Get a tax transcript."
     Click "Get Transcript by MAIL." Make sure to request the "IRS Tax Return Transcript."
  - <u>Get Transcript ONLINE</u> Go to <u>www.irs.gov</u>, under the Tools heading, click "Get a tax transcript." Click "Get Transcript ONLINE." Make sure to request the "IRS Tax Return Transcript."
  - Automated Telephone Request 1-800-908-9946
  - Paper Request Form IRS Form 4506T-EZ or IRS Form 4506-T
- **4.** If you did not file taxes, please provide a copy of all 2016 IRS W-2 Forms for each source of employment income received for the tax year AND **Confirmation of Non-Filing**, (not required for dependent student), from the IRS.

### 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
Home Phone Number (include area code)			Alternate or Cell Phone Number

Student's Name:	Student #	18-19 V-1 Page 2

# **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, 2018, through June 30, 2019, or if the other children would be required to provide parental information if they were completing a FAFSA for 2018-2019. 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, 2019.

# **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, 2018, through June 30, 2019, even if a child does 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, 2019.

**Number in College:** Include information about any household member who is, or will be, enrolled <u>at least half time</u> in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2018, and June 30, 2019, include the name of the college. **DO NOT** include college information for parents.

Write the names of all household members in the spaces below regardless of college enrollment status.

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.

<u>C.</u>	C. Student's Tax Forms and Income Information (all Applicants)				
The instructions below apply to the student and spouse, if the student is married. Notify the financial aid office if the student or spouse filed separate IRS income tax returns for 2016 or had a change in marital status after December 31, 2016.					
Chec	ck the box that applies.				
	The student and spouse (if married) filed instructions to obtain your 2016 IRS Tax	or will file a 2016 U.S. Income Tax Return. (Reference Return Transcript.)	r to page 1 for		
	The student and spouse (if married) were f student is Independent, Confirmation	e not employed and had NO income earned from woon of Non-Filing MUST be provided.	ork in 2016.		
ПТ	The student and/or spouse (if married) w	vere employed in 2016, but are not required to file a	2016 U.S.		
		endent, Confirmation of Non-Filing MUST be pr			
	± •	unt earned from each employer in 2016, and whether			
	* *	l. (Provide copies of all 2016 IRS W-2 forms issued			
	1 2 /	ry employer even if the employer did not issue an II	RS W-2 form. If		
n	nore space is needed, provide a separate		2016 Amount		
	Employer's Name	IRS W-2 Provided?  If no, please explain	2016 Amount Earned		
	Suzy's Auto Body Shop (example)	Yes	\$4,500.00		
	Suzy 3 Milo Body Shop (example)	100	ψ+,500.00		
	Total Amount of Income Earned from Work in 2016 \$				
D. Parent's Tax Forms and Income Information (if student is Dependent)					
The instructions below apply to each parent included in the household. Notify the financial aid office if the parents filed separate IRS income tax returns for 2016 or had a change in marital status after 12/31/2016.					
Chec	ck the box that applies.				
	The parent(s) filed or will file a 2016 U.s our 2016 IRS Tax Return Transcript.	S. Income Tax Return. (Refer to page 1 for instruction)	ons to obtain		
Neither parent was employed and had no income earned from work in 2016.  Confirmation of Non-Filing MUST be provided.					
One or both parents were employed in 2016, but are not required to file a 2016 U.S. Income Tax Return.					
$\Box$ C	One or both parents were employed in 20	016, but are not required to file a 2016 U.S. Income	Tax Return.		
		016, but are not required to file a 2016 U.S. Income out earned from each employer in 2016, and whether			
L	ist the names of all employers, the amoorm is provided. (Provide copies of all 2	ount earned from each employer in 2016, and whether 2016 IRS W-2 forms issued to the parents by their e	er an IRS W-2 mployers). List		
L fo	ist the names of all employers, the amount is provided. (Provide copies of all 2 very employer even if the employer did	ount earned from each employer in 2016, and whether 2016 IRS W-2 forms issued to the parents by their each issue an IRS W-2 form. If more space is needed	er an IRS W-2 mployers). List d, provide a		
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L fo	cist the names of all employers, the amoorm is provided. (Provide copies of all 2 very employer even if the employer did eparate page with student's name & ID Employer's Name	unt earned from each employer in 2016, and whethe 2016 IRS W-2 forms issued to the parents by their e not issue an IRS W-2 form. If more space is needed. Confirmation of Non-Filing MUST be provide IRS W-2 Provided?  If no, please explain	er an IRS W-2 mployers). List d, provide a d. 2016 Amount Earned		

Student's Name:\_\_\_\_\_ Student #\_\_\_\_

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E. Other Untaxed Income for 2	2016		
If any item does not apply, enter "N/A" f	for Not Applicable whe	re a response is reque	sted, or enter "0" in an
area where an amount is requested.	rr	<u></u> 1 1	,
If the student was required to provide pare	ental information on the	FAFSA, answer each	question below as it
applies to the student and the student's par			
required to provide parental information of	. /		
(and the spouse, if married).	ii tile i 711 571, aliswei e	acii question octow a	s it applies to the student
(and the spouse, if married).			
Child Support Received			
List actual amount of any child suppor	t received in 2016 for th	he children in your ho	nusehold <b>Do not include</b>
foster care payments, adoption paymer		•	
Name of Adult Who Received Child	Name of Child For V		Annual Amount of Child
Support	Recei		Support Received in 2016
Support	Recei	iveu	Support Received in 2010
Total Amount of Chil	ld Support Received in 2016	í	\$
Additional Information:			
So that we can fully understand the stu	ident's family's financia	al situation, please ind	dicate if you, your parents
or anyone in your parents' household,	(if dependent), received	l benefits in 2016 or 2	2017 from any of the
federal programs listed? Mark all that	· · · · · · · · · · · · · · · · · · ·		•
☐ Medicaid or Supplemental Security	11 •		
☐ Supplemental Nutrition Assistance	Program (SNAP)		
☐ Free or Reduced Price Lunch			
☐ Temporary Assistance for Needy F	Families (TANF)		
☐ Special Supplemental Nutrition Pro	ogram for Women, Infa	nts, and Children (W	IC)
1 11			
Comments regarding family's financial sit	uation:		
F. Certifications and Signature	es		
Each person signing below certifies that al	l the information report	ted is	
complete and correct. If student is Depend	ent, the student and one	e parent   WARNING:	If you purposely give false
whose information was reported on the FA		- 1	ng information, you may be
whose information was reported on the 17	ii 571 <u>ivioo i</u> sign und c	fined,	sent to prison, or both.
	<del></del>		
Print Student's Name	Student's ID#	MAIL COMPLETE	D FORMS TO:
		·	MMUNITY COLLEGE
Student's Signature	Date	C/O FASCPC	
Student's Signature	Date	1411 Indiana A	VENUE
		JASPER, AL 3550	
Parent's Signature	Date	5. 5. Elig 7 12 9000	, 200 221 2071

Student #\_

Student's Name:\_

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Do not mail this worksheet to the Department of Education.

It is the policy of the Alabama Community College System, its Board of Trustees, and Bevill State Community College, a postsecondary institution under its control, that no person shall, on the grounds of race, color, disability, sex, 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.