

Bevill State Community College

2017-2018 Verification Worksheet **Apply for Federal Student Aid at http://www.fafsa.gov/**



- 1. Your 2017-2018 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 2015 IRS Tax Return Transcript from the IRS. This may be obtained through:
 - <u>Get Transcript by MAIL</u> Go to <u>www.irs.gov</u>, 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 2015 IRS W-2 Forms for each source of employment income received for the tax year.

A. Student Information

Last Name	First Name	Middle	Social Security Number
Street Address (i	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 #	17-18 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, 2017, through June 30, 2018, or if the other children would be required to provide parental information if they were completing a FAFSA for 2017-2018. 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, 2018.

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, 2017, through June 30, 2018, 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, 2018.

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, 2017, and June 30, 2018, 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.

ident's Name: Student #			17-18 V-1 Page 3		
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 2015 or had a change in marital status after December 31, 2015.					
Check the box that applies.					
The student and spouse (if married) filed or will Refer to page 1 for instructions to obtain your 2. The student and spouse (if married) were not expressed in the student and spouse (if married) were not expressed.	2015 IRS Tax Re	turn Transcript.	 -		
The student and spouse (if married) were not employed and had no income earned from work in 2015. The student and/or spouse (if married) were employed in 2015, but are not required to file a 2015 U.S. Income Tax Return. List the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is provided. (Provide copies of all 2015 IRS W-2 forms issued to the student and spouse by their employers). List every employer even if the employer did not issue an IRS W-2 form. If more space is					
needed, provide a separate page with student's Student's Employer's Name	2015 Amount	IRS V	W-2 Provided?		
1 0	Earned	If no,	please explain		
Suzy's Auto Body Shop (example)	\$2,000.00		Yes		
		<u></u>			
Total Amount Earned in 201		\$			
Provide documentation from the IRS or other relevant tax authority dated on or after October 1, 2016 that indicates a 2015 IRS income tax return was not filed with the IRS or other relevant tax authority. 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 20	015 or had a chan	ge in marital statu	s after December 31,		
2015.					
Check the box that applies.					
The parent(s) filed or will file a 2015 U.S. Income Tax Return. Refer to page 1 for instructions to obtain your 2015 IRS Tax Return Transcript. Neither parent was employed and had no income earned from work in 2015.					
Treatment parent was employed and had no meome carned from work III 2013.					
One or both parents were employed in 2015, but are not required to file a 2015 U.S. Income Tax Return. List the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is provided. (Provide copies of all 2015 IRS W-2 forms issued to the parents by their employers). List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, provide a separate page with student's name & ID#.					
Parent's Employer's Name	2015 Amou	nt II	RS W-2 Provided?		
	Earned	<u> </u>	no, please explain		
Suzy's Auto Body Shop (example)	\$2,000.00		Yes		
Total Amount Earned in	2015	\$			

Total Amount Earned in 2015 \$

Provide documentation from the IRS or other relevant tax authority dated on or after October 1, 2016 that indicates a 2015 IRS income tax return was not filed with the IRS or other relevant tax authority.

Student's Name:	Student #	17-18 V-1 Page 4			
E. Other Untaxed Income for 2015					
If any item does not apply, enter "N/A" for area where an <u>amount</u> is requested. If the student was required to provide pare applies to the student and the student's par required to provide parental information of (and the spouse, if married). Child Support Received	ntal information on the FAF rent(s) whose information is	FSA, answer each question below as it on the FAFSA. If the student was not			
List actual amount of any child suppor		nildren in your household. Do not include			
Name of Adult Who Received the Support	nts or any amount that was c Name of Child For Whom Received				
Total An	nount Received	\$			
☐ Medicaid or Supplemental Security ☐ Supplemental Nutrition Assistance ☐ Free or Reduced Price Lunch ☐ Temporary Assistance for Needy F ☐ Special Supplemental Nutrition Pro Comments regarding family's financial sit	Program (SNAP) Families (TANF) Ogram for Women, Infants, a	and Children (WIC)			
Each person signing below certifies that all is complete and correct. If student is Dependent whose information was reported on and date.	I the information reported ndent, the student and one	WARNING: If you purposely give false or misleading information, you may be fined, sentenced to prison, or both.			
Print Student's Name	Student's ID#	Mail Completed forms to: Bevill State Community College			
Student's Signature	Date	C/O FASCPC 1411 Indiana Avenue			
Parent's Signature	Date	JASPER, AL 35501 FAX: 205-221-1841			

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.