



2017-2018 Verification Worksheet

Independent Student – Tracking Group V5

Your 2017-18 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 parents reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare 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 and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid office at East Central Community College. You may be asked for additional information. If you have questions about verification, contact your financial aid office as soon as possible so that your financial aid will not be delayed.

Section A: Student Information

Student's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Phone Number (include area code)			Student's ECCC ID Number

Section B: Family Information

List below the people in your household including:

- Yourself, and your spouse if you have one, and
- Your children, if you will provide more than half of their support from July 1, 2017 through June 30, 2018, even if they don't live with you, and
- Other people if they now live with you and your spouse (if applicable) AND you or your spouse provide more than half of their support and will continue to provide more than half of their support from July 1, 2017 through June 30, 2018.

Write the names of all household members in the space(s) below. Also write the name of the college for any household member who will be attending at least half-time between July 1, 2017 and June 30, 2018, and will be enrolled in a degree, diploma or certificate program. *If you need more space, attach a separate page with the student's name and Social Security Number at the top.*

Full Name	Age	Relationship	College
		Self	East Central Community College

Section C: Student Tax Information

CHECK ONLY ONE:

- Student and/or spouse has/have completed the data match using the Data Retrieval Tool at www.fafsa.gov.
- Student and/or spouse is/are providing a 2015 IRS Tax Return Transcript. (Visit www.irs.gov to order or print online.)
- The student and/or spouse was not employed and had no income earned from work in 2015.
- Student and/or spouse are/is not required to file a 2015 IRS Tax Return. List the employer's name and sources of income below and provide ALL W2s issued to student and/or spouse.

Employer's Name/Source of Income	2015 Amount Earned/Received	2015 W-2 Attached?

NOTE: We may require you to provide documentation from the IRS that indicates a 2015 IRS income tax return was not filed with the IRS.

Student Name: _____

Student ECCC ID Number: _____

Section D: High School Completion Status

One of the following documents must be provided to the Admissions Office that will indicate the student's high school completion status when the student begins college in 2017-2018.

- A copy of the student's final official high school transcript, showing the date that a high school diploma was awarded.
- A copy of the student's General Education Development (GED) certificate or GED transcript.
- A copy of the student's academic transcript indicating successful completion of at least a two-year program that is acceptable for full credit toward a Bachelor's degree.
- The student was homeschooled and the student's home state law requires a student to obtain a secondary school completion credential. A copy of that credential has been submitted to ECCC's Admission's Office.

Section E: Certification and Signatures

WARNING:

IF YOU PURPOSELY GIVE FALSE OR MISLEADING INFORMATION ON THIS WORKSHEET, YOU MAY BE FINED, PROSECUTED FOR FRAUD, SENTENCED TO JAIL, AND/OR FACE OTHER CHARGES, AND WILL HAVE TO REPAY ANY FINANCIAL AID FUNDS YOU RECEIVED.

By signing this worksheet, I (we) certify that all information reported to qualify for student financial aid is complete and correct, and I (we) have attached all documentation as required to this statement.

The student must sign and date this form.

Student Signature	Date	Spouse Signature (optional)	Date
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Section F: Identity and Statement of Educational Purpose

****SECTION F is ONLY to be completed in person at the Institution or in front of a Notary.****

The student must appear in person at East Central Community College to verify his or her identity by presenting a 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 office at the institution authorized to collect the student's ID. In addition, the student must sign, in the presence of the institutional official, the Statement of Education Purpose provided below. *If you cannot appear in person to sign this Statement of Educational Purpose, you will need to provide a copy of your government issued ID and this Statement of Educational Purpose notarized by a public notary.*

STATEMENT OF EDUCATION PURPOSE

I certify that I _____ am the individual signing this Statement of Educational Purpose
(Printed Student's Name)

and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending _____ for 2017-2018.
(Name of Postsecondary Educational Institution)

Student's Signature	Date	Financial Aid Administrator's Signature	Date
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Notary's Certificate of Knowledge

State of _____ City/County of _____ on _____
before me, _____ personally appeared, _____
(Notary's Name) (printed name of signer)

and proved to me on basis of satisfactory evident of identification _____ to be the above-named
(Type of government-issued photo ID provided)
person who signed the foregoing instrument.

WITNESS my hand and official seal _____
(Notary Signature) (Date Commission Expires)
(Seal)

This form should be submitted to the East Central Community College Financial Aid Office. It may be mailed, emailed, faxed, or brought into our office.
East Central Community College Financial Aid Office
P O Box 129 Decatur, MS 39327
PH 601-635-6326 FAX 601-635-5216