

# 2018-2019 Verification Worksheet

**Dependent Student – Tracking Group V5** 

Your 2018-19 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 (incl	ude 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
- Your parent(s)
  - If your parent is widowed or single, list that parent on this form.
  - If your legal parents (biological and/or adoptive) are married to each other, **OR** are unmarried <u>and</u> living together, list both legal parents below regardless of their gender. *Do not include any person who is not married to your parent and who is not a legal or biological parent.*
  - 0 If your legal parent has married/remarried, list your legal parent and your stepparent below.
  - If your legal parents are separated or divorced, list only the parent you lived with more in the past 12 months. If you did not live with either parent, or you lived with each parent an equal number of days, your parent is the one who provided more support in the most recent 12-month period. Support means gifts, loans, housing, food, clothing, car, money, medical and dental care, payment of college costs, etc.
- Your parents' other children, even if they don't live with your parent(s). If (a) your parent will provide more than half of their support from July 1, 2018 through June 30, 2019, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
- Other people if they now live with your parents and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2018 through June 30, 2019.

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 halftime between July 1, 2018 and June 30, 2019, 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: Parent Tax Information**

CHECK ONLY ONE:

Parent(s) has/have completed the data match using the IRS Data Retrieval Tool at www.fafsa.gov.

\_\_\_\_\_ Parent(s) is/are providing a 2016 IRS Tax Return Transcript. (Visit www.irs.gov to order or print online.)

\_\_\_\_\_ The parent(s) was/were not employed and had no income earned from work in 2016 and has submitted or will submit a "Verification of Nonfiling Letter" from the IRS dated on or after October 1, 2017 that they did not file a 2016 IRS income tax return.

Parent(s) is/are not required to file a 2016 IRS Tax Return. List the employer's name and sources of income below and provide ALL W2s issued to parent(s) and has submitted or will submit a "Verification of Nonfiling Letter" from the IRS dated on or after October 1, 2017 that they did not file a 2016 IRS income tax return.

Employer's Name/Source of Income	2016 Amount Earned/Received	2016 W-2 Attached?
		YES or NO
		YES or NO
		YES or NO

#### Section D: Student Tax Information

CHECK ONLY ONE:

\_\_\_\_\_ Student has completed the data match using the IRS Data Retrieval Tool at www.fafsa.gov.

\_\_\_\_\_ Student is providing a 2016 IRS Tax Return Transcript. (Visit <u>www.irs.gov</u> to order or print online.)

\_\_\_\_\_ The student was not employed and had no income earned from work in 2016.

\_\_\_\_\_ Student is not required to file a 2016 IRS Tax Return. List the employer's name and sources of income below and provide ALL W2s issued to parent(s).

Employer's Name/Source of Income	2016 Amount Earned/Received	2016 W-2 Attached?
		YES or NO
		YES or NO
		YES or NO

NOTE: We may require you to provide documentation from the IRS that indicates a 2016 IRS income tax return was not filed with the IRS.

#### Section E: 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 2018-2019:

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/HSE) certificate or GED/HSE transcript.

An 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 F: 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 and one parent (one listed on both FAFSA and in the household on this worksheet) must sign and date.

**Student Signature** 

Date

Parent Signature

Date

\*\*If you are unable to bring this completed document to the East Central Community College Financial Aid office, please complete the next portion of this form in front of a notary. \*\*

# Section G: Identity and Statement of Educational Purpose

#### \*\*SECTION G 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 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 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 assis	stance I may receive will only b	e used for educational purposes and to pay the cost	of attending	
			for 2018-2019.	
()	Name of Postsecondary Education	onal Institution)		
Student's Signature	Date	Financial Aid Administrator's Signature	Date	
	Notary's Certif	icate of Acknowledgement		
State of	City/County o	f		
			(Date)	
efore me, personally (Notary's Name)			d name of signer)	
	,	Ľ	to be the above-named	
nd proved to me on basis of satisfactory evident of identification(Ty		(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

East Central Community College is an equal educational and employment opportunity provider.