

2023-2024 Verification Worksheet V5 – Aggregate INDEPENDENT

Your 2023-2024 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 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.

	Student's Date of Birth
Zip Code	Student's Email Address
	Zip Code

Section B: Family Information

In the space below, include the following people in your household: (if more space is needed, attach a separate page with the student's name and ID number at the top).

- You, the student
- Your Spouse, if you are married
- Your Children (or Spouse's children) if you will provide more than half of their support from July 1, 2023, through June 30, 2024, even if the child does not live with you,
- Other People if they now live with you AND you provide more than half of their support and will continue to provide more than half of their support through June 30, 2024.

Full Name	Age	Relation to Student	College Attending in 2023-2024 (if enrolled at least half-time)
		Self	East Central 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.



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Section C: Student Tax Information

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\Box Th	he Student has used the	e IRS DRT on	the FAFSA to trans	fer 2021 IRS incom	ne tax information to the FAFSA.	
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- ☐ The Student is unable to or chose not to use the IRS DRT on the FAFSA, but will provide a 2021 Tax Return Transcript or a signed copy of their 2021 IRS Tax Return (Form 1040 and any Schedules).
 - If the student got married after 2021 taxes were filed, both the student's and the spouse's income is required on the FAFSA. The IRS DRT cannot be used if separate 2021 federal income tax returns are filed; therefore, a 2021 IRS Tax Return Transcript or a signed copy of the 2021 IRS Tax Return (Form 1040 and any Schedules) must be provided for both the student and the spouse.
- ☐ The Student was not employed and had no income earned from work in 2021.
- The Student was employed but is not required to file a 2021 IRS Tax Return. List below the employer's name and income earned and provide copies of all W2s issued to you.

Employer's Name/Source of Income	2021 Amount Earned/Received	2021 W-2 Attached?
Student:		YES or NO
Student:		YES or NO
Spouse:		YES or NO
Spouse:		YES or NO

If the student and/or the spouse were not required to file a 2021 IRS Income Tax Return, documentation must be provided from the IRS or other relevant tax authority dated on or after October 1, 2022 that indicated a 2021 income tax return was not filed with the IRS or other relevant tax authority, or a signed statement certifying that the individual attempted to obtain confirmation of non-filing from the IRS or other relevant tax authority and was unable to obtain the required documentation.

☐ The Student is providing a Verification of Non-Filing Letter dated on/after October 1, 202		The Student is provid	ing a Verification	n of Non-Filing L	Letter dated on	/after October 1	, 2022
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$\overline{}$	The snouse is	nroviding a	Verification	of Non-Filing	Letter dated or	n/after October :	1 2022
ш	The spouse is	providing a	verillication	OI NOII-FIIIII	Letter dated or	ijaitei Octobei .	1, 2022.

Date

Section E: Certification and Signatures

Student Signature

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 fin	ancial aid is complete and correct
and I (we) have attached all documentation as required to this sta	tement.

Due to the need for original signatures, a faxed or scanned copy of this form will not be accepted.

Spouse Signature (optional)

Date

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.



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Section F: Identify and Statement of Educational Purpose

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 official at the institution authorized to receive and review the student's ID.

In addition, the student must sign the Statement of Educational Purpose in the presence of a Financial Aid Administrator at ECCC. If the student is unable to come to the office, in person, then this document must be signed in the presence of a Notary.

	STATEMENT OF EDUCA	ATIONAL PURPOSE	
I certify tha	t I,(orint student name) am the individual sign	ning this
Statement	of Educational Purpose and that the Federal studer	nt financial assistance I may receive will on	lly be used for
educationa	purposes and to pay the cost of attending East Ce	ntral Community College for 2023-2024.	
Student Sig	nature:	Date:	
Financial Ai	d Administrator's Signature:	Date:	
	Notary's Certificate of	Acknowledgement	
State of	City/County of	on	befor
		(Dat	te)
me,	personally app	eared,	and
	(Notary's Name)	(Name of Student)	
proved to me on t	he basis of satisfactory evidence of identification _		to be the above
	(T:	ype of unexpired government-issued phot	o ID)
named person wh	o signed the foregoing instrument.		
Notary Signature:		WITNESS my hand and official	l seal
My commission ex	mires on:	(SFAL)	