

INDEPENDENT VERIFICATION WORKSHEET

Through the process called "Verification," your 2014-15 FAFSA information will be compared to this worksheet, additional documentation and Federal Income Tax information. **No payments will be disbursed until we receive and review these documents.**

• Student and spouse (if married) should complete both sides of this worksheet and sign. Do not leave any answers blank.

List the people in your household, including: • You and your spouse (if married), unless your spouse is not living in the household dude to separation or divorce. • Your children if you provide more than half of their support from July 1, 2014 through June 30, 2015, even if they do not with you • Other people if they now live with you and your spouse (if married) provide more than half of their financial support and continue to provide more than half of their support from July 1, 2014 through June 30, 2015. • Please include the ages of your household members. Write in the name of the college for any household members. Write in th	STUDENT INFORMATION			
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STUDENT: One of the following must be checked.			SPOUSE: One of the following must be checked.						
a 20	I have filed a 2013 Federal income tax return & will provide a 2013 Tax Return Transcript or use the IRS Data Retrieval tool from the FAFSA.			I/We have filed a 2013 Federal incorprovide a 2013 Tax Return Transcrip Retrieval Tool from the FAFSA.					
	I will not file and am not required to file a 2013 Federal income tax return.			I/We will not file and are not require income tax return.	ed to file a 2013 Federal				
DA	ATA RETRI	r have completed a Federal 2013 tax return please EVAL TOOL from the FAFSA application (please see ID COPIES OF YOUR TAX RETURN – We must have	the	Tax Information Instruction Sheet).					
D. A	DDITIONAL	FINANCIAL INFORMATION							
	DENT 2013 RMATION			the form will be returned causing on the not applicable, enter \$0	lelays.				
\$		Payments to tax-deferred pensions & savings pla amounts reported on W-2 Form Box 12a - 12d, c			gs) including,				
\$		Child support received for all children. Don't in	clud	e foster care or adoption payments.					
\$		Housing, food, & other living allowances paid to value of on base military housing or of basic mil			s. Don't include the				
\$		Veterans' non-education benefits, such as Disak Compensation (DIC) and/or VA Educational Wor	-		ndemnity				
\$	Any other untaxed income or benefits, such as workers' compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, Refugee Assistance, etc. Don't include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, combat pay, benefits from flexible spending arrangements, foreign income exclusion or credit for federal tax on special fuels.								
\$		Cash received or money paid on your behalf (e.	g., b	lls), not reported on this form.					
\$		Combat pay or special combat pay. Only enter t gross income. Do not enter amount reported or			in adjusted				
\$	Taxable earnings from need-based employment programs (Federal Work Study) and need-based employment portions of fellowships & assistantships. Please include earnings from work under a cooperative education program offered by a college.								
\$		Untaxed portion of IRA Distributions / Untaxed portion of Pensions							
\$	\$ Tax-Exempt Interest Income								
E. SIGN THE WORKSHEET									
applic not in satisfa one so the ac you u other	The College must review the requested information, under the financial aid program rules (CFR title 34, Part 668). If you are the student, by signing this application you certify that you (1) will use federal and/or state student financial aid only to pay the cost of attending an institution of higher education, (2) are not in default on a federal student loan or have made satisfactory arrangements to repay it, (3) do not owe money back on a federal student grant or have made satisfactory arrangements to repay it, (4) will notify your school if you default on a federal student loan and (5) will not receive a Federal Pell Grant for more than one school for the same period of time. If you are the parent or the student, by signing this application you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include your U.S. or state income tax forms that you filed or are required to file. Also, you certify that you understand that the Secretary of Education has the authority to verify the information reported on this application with the Internal Revenue Service and other federal agencies. If you sign any document related to the federal student aid programs electronically using a Personal Identification Number (PIN), you certify that you are the person identified by the PIN and have not disclosed that PIN to anyone else. WARNING: if you purposely give false or misleading information on the worksheet, you may be fined \$20,000, sent to prison, or both.								
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Stude	ent's Signa	ture Date	Sp	ouse's Signature	Date				