

# Independent Verification Worksheet

2018-2019

Your FAFSA application was selected by the U.S. Department of Education 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 reported on your FAFSA. In this process, the school will be comparing information from your application with you and your spouse's 2016 Federal tax transcripts, wage and income transcript or other financial documents. If there are differences between your application information and the documents submitted the school will make corrections electronically. Complete this verification worksheet and submit to the office of Financial Aid as soon as possible. The office may ask for additional information if necessary. The J.F. Drake State Community and Technical College financial aid counselors will be glad to assist you.

**Student Information**

Last Name	First Name	M.I.	Social Security Number
Address			Student ID Number (D number)
City	State	Zip Code	Date of Birth
Email Address			(area code) Phone Number

**Family Information**

Write your name on the first line, and then names of all household members in the spaces below. Include your spouse if you are married, any dependent children, or other people you will provide more than half of their support from July 1, 2018, through June 30, 2019. Then, write in the name of the college for any household member who will be attending at least half time in a degree, diploma, or certificate program between July 1, 2018, through June 30, 2019. If you need more space, attach a separate page.

Full Name	Age	Relationship	College
		<b>SELF</b>	J.F. Drake State Community & Technical College

**SNAP BENEFITS RECEIVED** – I certify that a member of my household, listed in the Family Information section of this worksheet, received **SNAP** benefits in 2016, 2017 or current. If requested, I will provide documentation of the receipt of **SNAP** benefits.

**Total of SNAP benefits received in 2016/2017:** \_\_\_\_\_

**CHILD SUPPORT PAID** – I certify that either I, or my spouse, **paid** child support in 2016. I understand that I may be requested to provide additional documentation of the payment of child support. Do not include support **received** in this section. *Fill out the table below.* If you need more space, attach a separate page.

Child Support Paid By	Child Support Paid To	Name of Child	Amount of Child Support Paid for 2016
			/monthly
			/monthly
			/monthly
			/monthly

**Total of child support paid in 2016:** \_\_\_\_\_

Student Check one	IF YOU FILED TAXES...	Spouse Check one																		
	I <b>have used</b> the IRS Data Retrieval Tool to retrieve and transfer my <b>2016</b> IRS income information into the student's FAFSA. Proceed to Untaxed Income below.																			
	I <b>have not used</b> the IRS Data Retrieval Tool when filing the FAFSA on the web. I <b>have attached my 2016 Tax Return Transcript to this worksheet</b> . Please note that a tax return transcript is not the same as your original 1040 tax filing. To request a <b>Tax Return Transcript</b> , free of charge, from the Internal Revenue Service go online to <a href="http://www.irs.gov">www.irs.gov</a> . Make sure to request the "IRS Tax Return Transcript", <b>not</b> the IRS Tax Account Transcript". Verification cannot be completed until the IRS Tax Return Transcript(s) has been submitted to the College. Proceed to Untaxed Income below.																			
	<b>IF YOU DID NOT FILE TAXES – a non-filers statement from the IRS is required</b>																			
	Check here if you and/or your spouse worked, but did not file, and were not required to file, a 2016 Federal Income Tax Return. List the name of all employers and wages received in 2016 below. <b>Copies of W2s ARE REQUIRED</b> . Proceed to <b>both</b> Untaxed Income and Household Resources / Documentation of Support section below.																			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Student's Employer(s)</th> <th style="width: 10%;">2016 Wages</th> <th style="width: 10%;">W2 Required</th> <th style="width: 30%;">Spouse's Employer(s)</th> <th style="width: 10%;">2016 Wages</th> <th style="width: 10%;">W2 Required</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td style="text-align: center;">YES</td> <td></td> <td></td> <td style="text-align: center;">YES</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">YES</td> <td></td> <td></td> <td style="text-align: center;">YES</td> </tr> </tbody> </table>	Student's Employer(s)	2016 Wages	W2 Required	Spouse's Employer(s)	2016 Wages	W2 Required			YES			YES			YES			YES	
Student's Employer(s)	2016 Wages	W2 Required	Spouse's Employer(s)	2016 Wages	W2 Required															
		YES			YES															
		YES			YES															
	Check here if you or both you and your spouse were <b>not employed</b> and had no income earned from work in 2016. A <b>non-filers statement from the IRS is required</b> . Proceed to <b>both</b> Untaxed Income and Household Resources / Documentation of Support section below.																			
Student	2016 UNTAXED INCOME	Spouse																		
\$	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on <b>W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H, and S. ***Attach W2(s)***</b>	\$																		
\$	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh, and other qualified plans from IRS Form <b>1040 (total of lines 28 plus 32) or 1040A (line 17)</b> .	\$																		
\$	<b>Child Support Received</b> for all children in your household in <b>2016</b> . Do not include foster care, adoption payments, or any amount that was court-ordered but not actually paid. You may be requested to supply documentation.	\$																		
\$	Tax Exempt interest income from IRS Form <b>1040 (line 8b) or 1040A (line 8b)</b> .	\$																		
\$	Untaxed portions of IRA distributions from IRS Form <b>1040 (line 15a minus 15b) or 1040A (line 11a minus 11b)</b> . <b>Exclude Rollovers</b> . If negative, enter a zero here.	\$																		
\$	Untaxed portions of pensions from IRS Form <b>1040 (line 16a minus 16b) or 1040A (line 12a minus 12b)</b> . <b>Exclude Rollovers</b> . If negative, enter a zero here.	\$																		
\$	Housing, food, and other living allowance paid to members of the military, clergy, and others (including cash payments and cash value of benefits).	\$																		
\$	Veteran's on-education benefits such as disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$																		
\$	Other untaxed income or benefits not reported elsewhere, such as workers compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, disability, etc. Do NOT include student aid, WIOA educational benefits, or benefits from flexible spending arrangements.	\$																		
\$	Money received or paid on your behalf (for bills in your name) not reported elsewhere on this form. Include 529 plan that is owned by someone other than your parents (such as grandparent, aunt, or uncle.)	\$																		

**Household Resources/Documentation of Support** (If you reported low or no earned income, this must be completed. Please attach explanation.)

So that we can fully understand a student's financial situation, please provide information about any other resources, benefits, and other amounts received by the student and any members of the student's household on a separate sheet or attach documentation. Include support received that was not required to be reported on the FAFSA or other forms submitted to the financial aid office. This should include Social Security benefits, financial aid refunds, Federal Work Study, etc.

**SIGN BELOW!** By signing this worksheet, I (we) certify that all the information reported on this worksheet is complete and correct.

**WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

<b>STUDENT SIGNATURE</b>	<b>SPOUSE SIGNATURE</b>
<b>Date</b>	<b>Date</b>

**REVIEW, SIGN AND RETURN THIS FORM TO THE FINANCIAL AID OFFICE**

J.F.DRAKE STATE COMMUNITY AND TECHNICAL COLLEGE  
Office of Financial Aid  
3421 Meridian Street North, Huntsville, AL 35811, 256.551.7270