

Your **2016-2017** 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 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 administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

**A. Student Information**

Last Name	First Name	Middle Initial
Social Security Number	Student ID Number	Date of Birth

**B. Family Information** - List below the people in your household. Please include:

**Dependent Students**

- Yourself and your parent(s) even if you do not live with them. Must include step-parent if your custodial parent is remarried as well as parents that live together regardless of marital status or gender.
- Your parent(s)' other children if your parent(s) provide more than half of their support from July 1, 2016 through June 30, 2017, or if the other children would be required to provide parental information if they were completing a FAFSA for 2016-2017. Include children who meet either of these standards, even if they do not live with your parent (s).
- Other people ONLY IF they live with your parent(s) now, AND your parent(s) will continue to provide more than half of their support from July 1, 2016 through June 30, 2017.

**Independent Students**

- Yourself and your spouse, if married.
- Your children, if any, and if you will provide more than half of their support from July 1, 2016 through June 30, 2017, or if the children would be required to provide your information if they were completing the 2016-2017 FAFSA. Include children who meet either one of these standards, even if they do not live with you.
- Other people ONLY if they live with you now AND you will continue to provide more than half of their support from July 1, 2016 through June 30, 2017. ***We may request legal/court documentation to verify support of these additional household members.***

Full Name	Age	Relationship to Student	College
		self (student)	Shoreline Community College

**Note:** Include the name of the college for any household member, excluding your parent(s), who will be enrolled at least half time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2016 and June 30, 2017. If more space is needed, attach a separate page with your name and Social Security Number at the top.

**C. 2015 Child Support Paid**

Did you, your spouse or a parent listed on section B of this form pay child support during the 2015 calendar year?

No                       Yes – Complete the section below

Name of Person Who Paid Child Support	Name of Person to Whom Child Support Was Paid	Name of Child for Whom Support Was Paid	Age of Child	Amount of Child Support Paid in 2015

If more space is needed, please attach a separate page with your name and Student ID number at the top.

**D. Student and Spouse (if married) Tax Forms and Income Information**

Did you or your spouse file a 2015 U.S. Federal Tax Return? Please check one box only.

- Yes**, and I used the IRS Data Retrieval Tool to directly import my income information into the FAFSA and have attached a copy of the 2015 W-2 Form from each employer.
- Yes**, but I did not use the IRS Data Retrieval Tool. I am attaching a copy of my 2015 IRS Tax Return Transcript and have attached a copy of the 2015 W-2 Form from each employer. OR will submit by \_\_\_\_\_ (enter date).
- No**, but I am required to file a 2015 U.S. Federal Tax Return. I will file my taxes and submit my tax transcript and a copy of the 2015 W-2 Form from each employer by \_\_\_\_\_ (enter date).
- No**, I am not filing and I am not required to file a 2015 U.S. Federal Tax Return. I have attached a copy of the W-2 Form from each employer if I have wages from work in 2015.
- No**, not applicable.

**E. Parent (if dependent) or Spouse (if filing separately) Tax Forms and Income Information**

Did you (the parent or spouse) file a 2015 U.S. Federal Tax Return? Please check one box only.

- Yes**, and I used the IRS Data Retrieval Tool to directly import my income information into the FAFSA and have attached a copy of the 2015 W-2 Form from each employer.
- Yes**, but I did not use the IRS Data Retrieval Tool. I am attaching a copy of my IRS Tax Return Transcript and have attached a copy of the 2015 W-2 Form from each employer. OR will submit by \_\_\_\_\_ (enter date).
- No**, but I am required to file a 2015 U.S. Federal Tax Return. I will file my taxes and submit my tax transcript and a copy of the 2015 W-2 Form from each employer by \_\_\_\_\_ (enter date).
- No**, I am not filing and I am not required to file a 2015 U.S. Federal Tax Return. I have attached a copy of the W-2 Form from each employer if I have wages from work in 2015.
- No**, not applicable.

**F. Supplemental Nutrition Assistance Program (SNAP-food stamp)**

Did you, your spouse, your parent, or anyone in your household receive benefits from the Supplemental Nutrition Assistance Program (SNAP), formerly known as food stamps, at any time during the 2014 or 2015 calendar year?

- No**       **Yes** – If asked by the school I will provide documentation of the receipt of SNAP benefits.

**G. Other Untaxed Income**

- I/We **DID NOT** receive any non-taxable 2015 income.
- I/We received non-taxable income as indicated (below)

**Review each source of non-taxable income and provide annual dollar amount in 2015:**

<b>2015 Untaxed Income which must be reported on FAFSA</b>	<b>\$ Annual Amount</b>
Payments to tax-deferred pension and savings, including but not limited to amounts reported on the 2015 W2 form in Box 12a through 12d, codes D,E,F,G,H, and S.	\$
Child support received for any of your children, Don't include foster care or adoption payments.	\$
Housing, food and other living allowances paid to members of the military, clergy and others (Don't include the value of a basic military allowance for housing)	\$
Veterans non-education benefits such as Disability, Death Pension or Dependency & Indemnity Compensation (DIC) or VA Educational Work-Study Allowances	\$
Other untaxed income ( Worker's compensation, disability, untaxed portion of health saving accounts from IRS Form 1040)	\$
Money received or paid on the applicant's behalf (This includes money that you received from a parent whose information is not reported on the FAFSA) Also include distributions to you (from a 529 plan that is owned by someone other than you or your parents, (such as grandparents)	\$

<b>2015 Untaxed Income Total</b>	\$
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**H. Additional Financial Support**

– Please provide information about any other resources, benefits and other amounts received by student/parent and any members of the student’s household. This may include items that were not required to be reported on the FAFSA or elsewhere on this form. Please include such things as Federal Veteran’s Educational benefits, military housing, SNAP (Food Stamps), TANF, untaxed Social Security benefits, Supplemental Security Income, WIA educational benefits or other cash assistance, financial support from friends or relatives, etc.

Name of Recipient	Type of Financial Support (not reported on FAFSA)	Amount Received in 2015
		\$
		\$
		\$
		\$
		\$

**Written Explanation:** Please explain how you and/or your family were able to pay for your living expenses in 2015.

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**I. Certification and Signatures:** Each person signing this worksheet certifies that all of the information reported on it is complete and correct. **If dependent, the student and one parent must sign and date this worksheet.** **WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

\_\_\_\_\_  
Student’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent’s Signature (if dependent)

\_\_\_\_\_  
Date