

Verification Worksheet – Dependent – 2023-2024

Your FAFSA application was randomly selected by the federal processor for a process called "verification." The law states that before awarding Federal Student Aid we may ask you to confirm the information you and your parents reported on your FAFSA. The Financial Aid Office compares information from your FAFSA with your and your parent's financial documents. The Financial Aid Office may be required to correct your FAFSA if there are differences between your FAFSA and the documents you submit for verification.

Required Steps and Instructions:

- 1. Complete all sections of this worksheet, including signatures, in blue or black ink. (We cannot accept pencil.) You and your parent MUST sign this worksheet. Electronic signatures are not permitted.
- 2. Submit this worksheet and other required documents to the Financial Aid Office. Do not submit this worksheet to the U.S. Department of Education.
- 3. Incomplete worksheets are not accepted. These documents are required to complete your financial aid file and must be submitted prior to the recommended quarterly deadline in order to be processed before the start of the quarter.

Student Information:

Last Name	First Name	MI	SID
Email Address			Phone Number

Family Information:

In the table below, include all of the following:		Include other people as part of your parents' household ONLY IF:		
ব	Yourself Your parent/s (that you included on the FAFSA, plus stepparent) even if you don't live with them. Your parents' dependent (under age 24) children, if your parents will provide more than half of their support between July 1, 2023 – June 30, 2024.	2 2	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 between July 1, 2023 – June 30, 2024. Documentation may be required. They would be considered to be "dependent" based on the dependency status questions on the FAFSA (they could answer "no" to all dependency status questions).	

List yourself first, then <u>all</u> household members. If any household member, excluding your parent(s), will be attending college at least half time, in a degree or certificate program, include the name of the college. If you need more space, attach a separate page.

Full Name	Age	Relationship	If attending college from 07/01/23 – 06/30/24, college name
		Self	Shoreline Community College
		Parent	

Supplemental Nutrition Assistance Program (SNAP):

Did you, 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 2021 or 2022 calendar years? Yes No

Student and Parent Tax and Income Information for 2021:

For a faster alternative to requesting the IRS Tax Return Transcript, you can correct your FAFSA online by going to <u>www.studentaid.gov</u> and use the IRS Data Retrieval Tool. *Check the appropriate box below for Student AND for Parent.*

To request a 2021 Tax Return Transcript go to <u>www.irs.gov</u> or call 1-800-908-9946.

STUDENT (check only one box below)			PARENT (check only one box below)		
 I used the IRS Data Retrieval Tool on the FAFSA. If you used the IRS Data Retrieval Tool, and did not chain information, you do not need to submit Tax Return Trans I am attaching my 2021 IRS Tax Return Transcript. Peninsula College will only accept signed copies of tax reunable to obtain a transcript from the IRS. I filed an amended 2021 Tax Return. If you select this option you must submit a Tax Return T signed copy of your 1040X form. I did not file a 2021 Tax Return and did not have earning I had income earned but did not file a 2021 Tax Return A required to file a Tax Return. 	cripts. eturns if you are ranscript and a s in 2021. ND I am not list your		My parent used the IRS Data Retrieval Tool on the F If they used the IRS Data Retrieval Tool, and did not information, you do not need to submit their Tax Ref I am attaching my parent's 2021 IRS Tax Return <u>Tr</u> Peninsula College will only accept signed copies of funable to obtain a transcript from the IRS. My parent filed an amended 2021 Tax Return. If you select this option you must submit a Tax Retu signed copy of your parent's 1040X form. My parent did not file a 2021 Tax Return and did not 2021. <u>Must provide Verification of Non-filing Letter file</u> My parent had income earned but did not file a 2021 not required to file a Tax Return. <u>If you select this of</u> parent's employer(s) & income earned below and earnings from 2021. Must provide Verification of Non- IRS.	t change the rum Transcripts. anscript. tax returns if you are rn Transcript and a t have earnings in <u>com IRS.</u> Tax Return AND is option, list your d attach W-2s for all	
Employer	Earnings/Income	Emp	bloyer	Earnings/Income	
	\$			\$	
	\$			\$	
	\$			\$	

Child Support Paid:

Complete this section if one or both parents indicated on the FAFSA that they paid child support in 2021. If zero, write zero or "not applicable." Please do not leave this section blank.

Name of person who paid Child Support	Name of person to whom Child Support was paid	Yearly amount paid	Name & Age of Child for whom support was paid
		\$	
		\$	
		\$	
		\$	
		\$	

Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation, such as:

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks or money order receipts.

Identity and Statement of Educational Purpose - (ONLY COMPLETE SECTION A or B, NOT BOTH!)

Section A - TO BE SIGNED AT THE SCHOOL

I am appearing in person at Shoreline Community College to verify my identity by presenting a valid government-issued photo ID (driver's license, other state-issued ID, or passport). A Financial Aid or Student Services staff member will photocopy and maintain a copy of my photo ID.

ONLY COMPLETE SECTION A IF APPEARING IN PERSON. IF YOU ARE COMPLETING SECTION A, DO NOT ALSO COMPLETE SECTION B.

In addition, I must sign the following in the presence of a Financial Aid or Student Services staff person:

Statement of Educational Purpose

I certify that I ______am the individual signing this Statement of Educational Purpose and that the federal student (Student's full name)

financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Shoreline Community College for 2023-2024.

Student's Signature

Date FA or SS Staff Signature

Section B - TO BE SIGNED WITH NOTARY

- I am unable to appear in person at Shoreline Community College to verify my identity, I am providing:
 - (a) A copy of unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport. AND
 - (b) The original notarized Statement of Educational Purpose provided below.

ONLY COMPLETE SECTION B IF YOU CANNOT APPEAR AT THE SCHOOL IN PERSON. IF YOU ARE COMPLETING SECTION B, DO NOT ALSO COMPLETE SECTION A.

Statement of Educational Purpose

I certify that I		am the individual signing this Statement of Educational Purpose and that the federal stude
	(Student's full name)	

financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Shoreline Community College for 2023-2024.

Student's Signature

Date _

	Notary's Certificate of	l Acknowledgemen	it		
State of	City/County of		On	, before me,	
			(Date)		
	personally appeared,		and provided to me	on basis of satisfactory	
(Notary's name)		nted name of signer)			
evidence of identification	· · · · ·		to be the above-named person who signed the foregoing instrument.		
	(Type of government-issued photo ID provided)				
WITNESS my hand and official seal		My commission expires on			
(seal)	(Notary signature)		((Date)	

Required Signatures:

I affirm that the information provided in this worksheet and other financial aid documents is true and correct to the best of my knowledge. I agree that I have reviewed, understand and agree to the conditions, responsibilities and obligations in order to receive financial aid for the 2023-2024 academic year as stated in the Conditions of Award and Satisfactory Academic Progress Policy, available on the Financial Aid website.

Student Name	Signature	Date
Parent Name	Signature	Date