



2009- 2010 DEPENDENT STUDENT VERIFICATION WORKSHEET

Student Name: _____ **Student ID:** S

Phone Number: _____ **CCD STUDENT EMAIL:** _____@student.ccds.edu

Note: All requests and information –including information about financial aid awards will be emailed to your CCD Email.

For instructions on activating your account, please visit www.ccd.edu/finaid or contact our office at 303-556-5503.

Verification is the process where your school’s financial aid office will compare the information on this worksheet with the information you reported on your FAFSA application. **Make certain your (student) Name and Student ID are on every page of documentation. To ensure prompt processing of your financial aid, please make sure to complete all 3 Sections of the form. For items that do not apply please mark N/A or enter a zero. This form must be completed in black or blue pen.**

If you and/or your parents filed a tax return, you MUST include a signed copy of your 2008 Federal Tax Return (1040, 1040A, or 1040EZ).

Section 1: Student/Parent(s) Household Information

List below the people your parent(s) will provide support to between July 1, 2009 and June 30, 2010. Be sure to list your parents.

You should include the following:

- Yourself (STUDENT)
- Your Parent(s)(including stepparent) whether or not you physically reside with your parents.
- Your Parents’ dependent children, who are generally those born after January 1, 1986 and unmarried. You may also include those dependent children for whom they are required to provide parental data when they apply for financial aid.
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

FULL NAME	AGE	RELATIONSHIP TO STUDENT	COLLEGE ATTENDING between July 1, 2009 and June 30, 2010. Must be enrolled for 6 credits or more & working on an eligible degree or certificate. Parents attending college must indicate the name of their eligible program or certificate.
STUDENT (Please do NOT list yourself again)		SELF	Community College of Denver

If you included anyone in your household other than parents or parents’ children under 24, you are required to provide an explanation below. You must answer the following questions for each of these individuals. Include an additional page if needed.

1. The individual’s name **AND** 2. Why the household is supporting this individual **AND** 3. The dollar amount of **any** income that individual receives

In 2007 OR 2008, did you, your parents or anyone in your parents’ household receive benefits from any of the federal benefits programs? Please check all that apply:

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Supplemental Security Income | <input type="checkbox"/> Free or Reduced Price School Lunch | <input type="checkbox"/> Food Stamps |
| <input type="checkbox"/> Temporary Assistance for Needy Families (TANF) | | <input type="checkbox"/> WIC |
| <input type="checkbox"/> Low Income Housing (Section 8 Housing) | | |



Student Name: _____ **Student ID: S** _____

Section 2: Student/Parent(s) 2008 Income You must complete BOTH columns below – Be sure to answer each question!

STUDENT

PARENT(S)

<p>1. _____ I have filed or will file a 2008 federal tax form. Attach a SIGNED copy of your federal tax forms and continue to complete Section 3 below.</p>	<p>1. _____ I have filed or will file a 2008 federal tax form. Attach a SIGNED copy of your federal tax forms and continue to complete Section 3 below..</p>																												
<p>2. _____ I am not required to file a 2008 federal tax form.</p> <ul style="list-style-type: none"> If you <u>had earnings</u>: List below all employers and amounts of income from work that you received in 2008. If you <u>had no earnings</u> from work, please indicate 'NONE'. Complete Section 3 below <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="text-align: right;">Amount</td> </tr> <tr> <td>_____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Employer</td> <td style="text-align: right;">Amount</td> </tr> <tr> <td>_____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Employer</td> <td style="text-align: right;">Amount</td> </tr> <tr> <td>_____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Employer</td> <td></td> </tr> </table>		Amount	_____	\$ _____	Employer	Amount	_____	\$ _____	Employer	Amount	_____	\$ _____	Employer		<p>2. _____ I am not required to file a 2008 federal tax form.</p> <ul style="list-style-type: none"> If you <u>had earnings</u>: List below all employers and amounts of income from work that you received in 2008. If you <u>had no earnings</u> from work, please indicate 'NONE'. Complete Section 3 below. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="text-align: right;">Amount</td> </tr> <tr> <td>_____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Employer</td> <td style="text-align: right;">Amount</td> </tr> <tr> <td>_____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Employer</td> <td style="text-align: right;">Amount</td> </tr> <tr> <td>_____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Employer</td> <td></td> </tr> </table>		Amount	_____	\$ _____	Employer	Amount	_____	\$ _____	Employer	Amount	_____	\$ _____	Employer	
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Section 3: Additional Information: You must complete BOTH columns below- Be sure to answer each question

Student	Calendar Year 2008 Additional Information	Parent
\$ Monthly RECEIVED	Child support you received for all children. Do not include foster care or adoption payments.	\$ Monthly RECEIVED
\$ Monthly PAID	Child Support PAID for all children because of divorce or separation or as a result of a legal requirement. You must include the children's names in this box:	\$ Monthly PAID
\$ TOTAL ANNUAL	Earnings from Need-Based Federal Work-study	\$ TOTAL ANNUAL

Special Information

If your household income (untaxed plus taxable income) was low for a family of your size and you did not receive any of the benefits or assistance listed on page 1, please explain how your family met the household expenses. If someone pays expenses on your behalf, please indicate the amount they pay annually in your explanation. Attach an additional page if needed.

By signing this document, I certify that all the information reported on **both sides** is complete and correct.

Student Signature Date

Parent Signature Date

WARNING: if you purposefully enter false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.