

2018-2019 VERIFICATION WORKSHEET FOR DEPENDENT STUDENT FORM 1

Student Name (print): _____

SID#: S_____ Phone: _____

Email: _____@student.cccs.edu

Note: Your official CCD email account is the only email CCD will accept for correspondence.

Entire form must be completed in black or blue ink. Failure to accurately complete this form may result in a delay of processing or change of financial aid eligibility. Additional documentation may be requested. Read instructions carefully before completing.

Section 1: Household Information

Student/Parent(s) Information

List the people in your household, including:

- **Yourself** (as the 'Student'), and **your parent(s)**;
- **Your parents' other children**, even if they don't live with your parent(s), if (a) your parents will provide more than half of their support* from July 1, 2018 through June 30, 2019, or (b) the children would be required to provide parental information if they were completing a FAFSA for 2018-2019 and;
- **Other people** if they 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, 2018 through June 30, 2019.

*Support includes money, gifts, loans, housing, food, clothes, car, medical/dental care, college tuition, etc.

FULL NAME	AGE	RELATIONSHIP TO STUDENT	THE NAME OF THE COLLEGE ATTENDING from July 1, 2018 to June 30, 2019. Must attend at least ½- time & be enrolled in an eligible degree and/or certificate.
		SELF	
		PARENT 1	
		PARENT 2	

Use a separate page to list additional members in the household

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Section 2: Income Information Student/Parent(s) Income Information

TAX FILERS:

- If you and/or your parent(s) filed a Federal Income Tax Return, you must either give the Internal Revenue Service (IRS) permission to transfer all 2016 tax information directly to the FAFSA through the IRS Data Retrieval Tool or submit a 2016 IRS Tax Return Transcript(s) to the Financial Aid Office.
- To obtain an IRS Tax Return Transcript, you may go to <http://www.irs.gov/Individuals/get-transcript> and click on "Get a Transcript by MAIL" or call 1-800-908-9946. Be sure to order the IRS Tax "Return" Transcript.

NON-TAX FILERS:

- If your parent did not file a 2016 Federal Income Tax Return, they are required to submit a Statement of Non-Filing and all 2016 W2s. To receive a 2016 Statement of Non-Filing, go to <https://www.irs.gov/pub/irs-pdf/f4506t.pdf> and complete Form 4506-T with Box 7 checked. If your parents are not able to locate their 2016 W2s provided by their employer, they can request to receive their W2s by checking Box 8 on this form.

Student

Check the ONE box that applies to you:

- ☐ Student used **IRS Data Retrieval Tool** on the FAFSA
- ☐ Student has attached a copy of their **2016 IRS Federal Tax Return Transcript** to this worksheet
- ☐ Student has **not filed** and had **no income earned from work** in 2016
- ☐ Student has **not filed** and **had income earned from work** in 2016 as listed below and has attached all 2016 W2s to this worksheet:

Employer's Name: _____

2016 Income Earned: _____

Employer's Name: _____

2016 Income Earned: _____

If more space is needed, attach a separate page with student's name and student number

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Parent

Check the ONE box that applies to you:

- ☐ Parent used **IRS Data Retrieval Tool** on the FAFSA
- ☐ Parent has attached a copy of their **2016 IRS Federal Tax Return Transcript** to this worksheet
- ☐ Parent has **not filed**, has submitted a **2016 Statement of Non-filing**, and had **no income earned from work** in 2016
- ☐ Parent has **not filed**, has submitted a **2016 Statement of non-Filing**, and **had income earned from work** in 2016 as listed below and has attached all 2016 W2s to this worksheet:

Employer's Name: _____

2016 Income Earned: _____

Employer's Name: _____

2016 Income Earned: _____

If more space is needed, attach a separate page with student's name and student number

Note: Additional required documentation may be requested by the Financial Aid Office.

By signing this document, I certify that the information is complete, true and accurate. I understand that purposely providing false or misleading information could result in criminal prosecution, a prison sentence, and/or a fine pursuant to U.S. Criminal Code and Colorado Criminal Code.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____