

2010-2011 Verification Worksheet

Federal Student Aid Programs

Your application was selected for review in a process called "verification." In this process, we are required by federal law (34 CFR, Part 668) to compare the information from your application with the information provided on this form and with signed copies of your 2009 federal tax forms (and your spouse's if you are married, or parent (s)' if you are considered dependent for federal aid process). If there are differences between your application and the documents you submitted, corrections will be made. Verification for Pell, ACG-eligible students must be completed no later than 90 days after student's last date of attendance at BPCC or August 31, 2010, whichever is earlier. Verification for LEAP, SEOG, and Stafford and PLUS loan students must be completed 10 days prior to student's last day of attendance for a semester. **We cannot process your financial aid until verification has been completed, so please provide the required documents as soon as possible.**

WHAT YOU SHOULD DO:

1. Collect your (and if applicable, your spouse's or parent(s)') **signed 2009** federal income tax forms. Submit taxes to BPCC Financial Aid Office.
2. Complete this form and provide the required signatures (yours and your parents(s)', if applicable). Submit completed form to BPCC Fin Aid Office.
3. Do not make any further corrections to the FAFSA once you have submitted this form. **Note:** This Form will be returned to you if information is not fully and accurately completed.

A. STUDENT INFORMATION

Last Name	First Name	M.I.	Social Security Number or Campus ID number
Address (include apt. #)			Date of birth
City			() / ()
State	Zip Code	Home phone number / Cell phone number	

B. FAMILY INFORMATION How do you determine whether you are a **DEPENDENT** or an **INDEPENDENT STUDENT**?

An **INDEPENDENT STUDENT** will be able to state at least **one** of the following statements to be true: Please indicate below by checking which statement applies to you. **PROOF MAY BE REQUESTED! If you are able to check a box below, YOU ARE AN INDEPENDENT STUDENT.**

- You were born before January 1, 1987.
- You were married, as of the day you filed the Free Application for Federal Student Aid (FAFSA).
- You have children for whom you will provide more than half of their support from July 1, 2010 through June 30, 2011.
- You have dependents (other than your children or spouse) who live with you and you provided more than half of their support and will continue to provide more than half of their support from July 1, 2010 through June 30, 2011.
- When you were 13 years or older you were: an orphan (both parent's deceased), in foster care, or a ward/dependent of the court
- You are a veteran of the U.S. Armed Forces.
- You are currently serving on active duty in the U.S. Armed Forces for purposes other than training.
- You are an emancipated minor as determined by a court in your state of legal residence.
- You are in legal guardianship as determined by a court in your state of legal residence.
- You are an unaccompanied homeless youth as determined by either: your high school or school district homeless liaison, the director of an emergency shelter program funded by HUD, or the director of a runaway or homeless youth basic center transitional living program.

If you **CANNOT** check a box above, **YOU ARE A DEPENDENT STUDENT.**

Check ONE box below based on the definition of an independent student **as defined above** and then complete the **APPROPRIATE** table below.

DEPENDENT STUDENT:

- List the people in your parent(s)' household. Include:**
- **Yourself – PLUS:**
 - Your custodial parent(s) (include step -parent)
 - Your custodial parent(s)' dependent children
 - Other people only if 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 from 7/1/2010 – 6/30/2011.**

INDEPENDENT STUDENT:

- List the people in your household. Include Yourself plus:**
- Your spouse, if married
 - Your dependent children, if you will provide more than half of their support from 7/1/2010 – 6/30/2011.
 - Other people if they now live with you, **and you provided more than half of their support and will continue to provide more than half of their support from 7/1/2010 – 6/30/2011.**

Full Name	Age	College	Relationship
		BPCC	Self
			Mother/Stepmother
			Father/Stepfather
			Parent's Dependent Child
			Parent's Dependent Child
			Parent's Dependent Child
**			

Full Name	Age	College	Relationship
		BPCC	Self
			Spouse
			Your Dependent Child
			Your Dependent Child
			Your Dependent Child
			Your Dependent Child
**			

If you list others in your household (besides your spouse/dependent children or your parent's spouse/dependent children) you **MUST supply proof that you provide more than half the support for that person(s)

C. TAX FORMS AND INCOME INFORMATION

Section 1 If you did not keep a copy of your tax return, call the IRS at 1(800) 829-1040 and request a transcript of your tax forms.

Student: (Check one box only)

Check and attach signed tax return.

Check if you will not file and are not required to file a 2009 U.S. Income Tax Return. Complete Section 2 after finishing Section 1

FOR DEPENDENT STUDENTS

Parent(s): (Check one box only)

Check and attach signed 2009 federal tax return.

Check if you **will not file** and are **not required to file** a 2009 U.S. Income Tax Return. **Complete Section 2**

FOR INDEPENDENT STUDENTS

Spouse: (if married) (Check one box only)

Check and attach signed 2009 federal tax return.

Check if you **will not file** and are **not required to file** a 2009 U.S. Income Tax Return. **Complete Section 2**

Section 2 List all employers and any income received in 2009 for all family members who indicated in **SECTION 1** that they **did not file** and **are not required to file** a 2009 Federal income tax return. *If you have no income to report enter **NONE** under **Source of Income**.*

2009 Source of Income (i.e. Name of Employer)	Is income listed for student, spouse, or parent(s)? List one	2009 Income Amount
		\$
		\$
		\$
		\$
		\$
		\$

D. FUNDS RECEIVED FOR CHILD SUPPORT AND OTHER UNTAXED INCOME:

Both tax filers and non-tax filers must list any untaxed income received in 2009. **Enter zeros if no funds were received.**

Student/Spouse Annual Amount	Calendar year 2009	Parent(s) Annual amount
\$	Child support received for all children. Do not include foster care or adoption payments	\$
\$	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in boxes 12a through 12d, codes D, E, F, G, H, and S. (If an amount is entered, please submit a copy of W-2 to the BPCC Financial Aid Office)	\$
\$	Housing, food and other living allowances paid to members of the military, clergy and others (Do not include the value of on-base military housing or the value of a basic military allowance for housing.)	\$
\$	Veteran's noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$
\$	Other untaxed income not reported, such as worker's compensation, disability, etc. (Do not include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security, Supplemental Security Income (SSI), Workforce Investment Act educational benefits, on-base military housing or the value of a basic military allowance for housing, combat pay (if your parents are not tax filers), benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels)	\$

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

E. SIGN THIS WORKSHEET

Each person signing this form certifies that all the information reported on it is complete and correct. I understand that if there are differences between the application and verification documents, corrections may be required. The FA office will submit the corrections electronically. If dependent, at least one parent must sign this form.

Student's Signature

Date

Parent Signature (if dependent student)

Date