

2016-2017 Verification Worksheet

Federal Student Aid Programs Office of Financial Aid

Your application was selected for a review in a process called "Verification". Verification is a process governed by Federal and/or State regulations and is used to ensure that the information applicants report on the Free Application for Federal Student Aid (FAFSA) is accurate. In this process, MCCC will compare information from your 2016-17 FAFSA with this form, if applicable, copies of 2015 U.S. Federal Tax Return Transcripts, or with W-2 forms or other financial documents. Information retrieved using the Internal Revenue (IRS) Data Retrieval Process and not subsequently changed, is considered acceptable documentation for IRS-related information, and your Federal Tax Return Transcript will not be required.

The law requires us to ask for this information before awarding Federal Aid. If there are differences between your application information and your financial documents, MCCC will need to make corrections. If you do not complete this form or submit all of the required documents requested, we will not be able to complete the processing of your financial aid.

1. Complete and sign this worksheet on page 2.
2. Review your Student Aid Report (SAR), information request letters from the Financial Aid Office and the second page of this worksheet to see if you need to submit other documentation (such as default clearance letter, citizenship documentation, social security card, admission to degree program, etc.
3. Submit the completed worksheet, tax return transcripts, and any other documents to Financial Aid Office-Student Center room 213.
4. After a financial aid representative reviews your information, you could be asked to submit additional documentation. When all the information has been reviewed and any necessary corrections made, you will be notified about financial aid awards and payments.

A. Student Information

<hr/> <i>Last Name</i>	<hr/> <i>First name</i>	<hr/> <i>M.I.</i>	<hr/> <i>Social Security Number</i>	<hr/> <i>Colleague ID</i>
<hr/> <i>Address (include apt. no.)</i>			<hr/> <i>Date of birth</i>	
<hr/> <i>City</i>	<hr/> <i>State</i>	<hr/> <i>Zip Code</i>	<hr/> <i>Phone number (include area code)</i>	

B. Family Information

List the people that you (and your spouse) will support between July 1, 2016 and June 1, 2017. Include yourself and your spouse, and your dependent children. Include other people only if they now live with you and you provide more than half their support and you will continue to provide more than half of their support between July 1, 2016 and June 1, 2017.

Write the names of all family members including yourself. Also write the name of the college for any family member who will be attending college at least half-time between July 1, 2016 and June 1, 2017 and will be enrolled in a degree or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	College
Martha Jones (example)	18	Wife	Central University
		Self	

Section 2: TAX FILERS MUST PROVIDE IRS TAX INFORMATION (2 OPTIONS)

1. If you did NOT retrieve and transfer your and /or your spouse income tax return information using the IRS Data Retrieve Process when initially completing the FAFSA on the Web, you can make corrections using FAFSA on the Web to subsequently transfer this information. If we receive a corrected FAFSA indicating that the transfer was successful, the 2015 IRS FEDERAL TAX RETURN TRANSCRIPT document request for you (and your spouse, if married) will be removed. Check MCCC's Financial Aid Office online for the update of this requirement.

2. If you did not utilize the IRS Data Retrieval process, you must submit a copy of your 2015 FEDERAL TAX RETURN TRANSCRIPT. **Copies of the tax returns (IRS 1040, 1040A, 1040EZ) will no longer be accepted** with the exception of tax returns from Puerto Rico or foreign income tax returns. To request a copy of your 2015 FEDERAL TAX RETURN TRANSCRIPT from the Internal Revenue Service go to www.IRS.gov or to your local IRS office. If you amended your tax return after you filed, you must also provide a copy of the 2015 FEDERAL TAX ACCOUNT TRANSCRIPT.

C. Student's Income & Benefits Information

Check the appropriate statement below and provide the requested information and documents:

- I used the IRS Data Retrieval Tool to transfer my 2015 income information to the FAFSA and made no further changes to the information.
- I did not (or could not) transfer my 2015 income information to the FAFSA using the IRS Data Retrieval Tool. I have attached a copy of my **2015 IRS Tax Return Transcript**.
- I did not and am not required to file a 2015 Federal Income Tax Return. [Attach your **Forms W-2 or 1099** from all sources of earned income. Please list sources and amounts of any earned income received in 2015 for which there is no Form W-2 or Form 1099.]

Employer Name/Source of Untaxed Income	2015 Amount Earned

In 2014 or 2015, did you or any member of your household receive **food stamp (SNAP)** benefits? Y N

I paid **child support** in the amount of \$ _____ in the year 2015 to _____
year total *(name of the child support recipient(s))*
 residing at _____ for the following children: _____ , _____
(address) *(name and age)* , *(name and age)*

D. Spouse's Income & Benefits Information

Check the appropriate statement below and provide the requested information and documents:

- I used the IRS Data Retrieval Tool to transfer my 2015 income information to the FAFSA and made no further changes to the information.
- I did not (or could not) transfer my 2015 income information to the FAFSA using the IRS Data Retrieval Tool. I have attached a copy of my **2015 IRS Tax Return Transcript(s)**.
- I did not and am not required to file a 2015 Federal Income Tax Return. [Attach your **Forms W-2 or 1099** from all sources of earned income. Please list sources and amounts of any earned income received in 2015 for which there is no Form W-2 or Form 1099.]

Employer Name/Source of Untaxed Income	2015 Amount Earned

In 2014 or 2015, did you or any member of your household receive **food stamp (SNAP)** benefits? Y N

I paid **child support** in the amount of \$ _____ in the year 2015 to _____
year total *(name of the child support recipient(s))*
 residing at _____ for the following children: _____ , _____
(address) *(name and age)* , *(name and age)*

E. Certification

Each person signing this form certifies that all information reported on it is complete and correct. If married, spouse's signature is optional.

Student *Date*

Spouse *Date*

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