Independent Verification Worksheet

Southwestern College · 2016-2017

Student's Name: _____ **SSN:** _____ - _____ - _____

E-Mail: _____ **Phone:** _____

Your application has been selected for a process called Verification. This process requires that you complete all questions on this form and you may have to provide your federal tax transcripts for the 2015 tax year. Our office will then compare the information from your taxes and your FAFSA and make any necessary corrections.

*** Please note: if you use the IRS Database match tool on your 2016-2017 FAFSA you do NOT need to submit 2015 federal tax transcript.**

Please note that by law we have the right to ask for this information before awarding Federal Financial aid.
No further processing can be done until all documentation is provided.

A. Family Information

In the table below, list all the people you and your spouse will support through July 1, 2016 & June 30, 2017. Include:

1) **Yourself**
2) **Your spouse**
3) **Your children** (if they live with you & if you will provide more than half of their support from 07/01/16 - 06/30/17)
4) **Others in your household** (if they live with you and if you will provide more than half of their support from 07/01/16 - 06/30/17)

List family members' names, ages, relationship to you, and college name of those who will be enrolled at least ½ time in a degree or certificate program between 07/01/16 & 06/30/17.

Full Name:	Age:	Relationship:	Name of College:
		Self	Southwestern

B. Non-Filer Information

Complete this section only if you and/or your spouse were NOT required to file federal income taxes for 2015.

- ☐ Student was **NOT** required to file a 2015 income tax return.
- ☐ Spouse was **NOT** required to file a 2015 income tax return.

Student's Work	Amount Earned

Spouse's Work	Amount Earned

C. Child Support Paid

- ☐ My household and/or I **DID NOT** pay Child Support in 2015 (Go to section D).
- ☐ My household and/or I paid Child Support in 2015 (Complete chart below).

Amount Paid	Support Paid By:	Support Paid To:	Child/Children	Child's Age
$				
$				
$				
$				

D. Food Stamps – Supplemental Nutrition Assistance Program (SNAP).

- ☐ My household and/or I **DID NOT** receive SNAP Benefits (federal food stamps) in 2014 or 2015.
- ☐ My household and/or I received SNAP Benefits (federal food stamps) in 2014 or 2015. ***You are required to provide documentation from the agency that issues Food Stamp benefits.**

Warning! If you purposely give false or misleading information to help establish eligibility for federal student aid, you may be subject to a $20,000 fine, a prison sentence, or both. By signing this Verification Statement, we certify that all the information reported in support of the student's application for financial aid is complete and accurate.

Student's Signature **Date** **Spouse's Signature** (optional) **Date**

Please return this form along with your federal tax transcript if required by our school. You can order your federal tax transcript at http://www.irs.gov/transcript or by calling 1-800-908-9946 (You can send your transcript directly to Southwestern College). If you OR your spouse did not file taxes for 2015 please be sure to include amounts earned from work in Section B.

Southwestern College · Office of Financial Aid · 100 College Street · Winfield, KS · 67156
Phone: 620-229-6215 · Toll Free: 800-846-1543 Ext.6215 · Fax: 620-229-6245
Website: www.sckans.edu/finaid · E-Mail: finaid@sckans.edu