Name of Financial Aid Applicant (Please print in Black Ink)		nt in Black Ink)
Last	First	MI
Student ID Num	iber:	

CUYAMACA COLLEGE 2019-2020 INDEPENDENT STUDENT VERIFICATION WORKSHEET

Your 2019–2020 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. What you should do:

- Fill out all sections of this form, **EXCEPT SECTION 5**, and return it **IN PERSON** to the Cuyamaca College Financial Aid Office.
- Submit all other required documents to the Cuyamaca College Financial Aid Office.
- Complete this process as soon as possible so that your financial aid will not be delayed.
- If you have any questions about filling out this worksheet, talk to someone in the Financial Aid Office.

Section 1 - Family Information

List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2019, through June 30, 2020, <u>or</u> if the child would be required to provide your information if they were completing a FAFSA for 2019–2020. Include children who meet either of these standards, even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2020. (DO NOT include roommates).

*Shared living arrangement (i.e. roommate) is not the same as "support."
Support means: currently providing more than half of all living expenses for that person because that person listed has no means of self-support, or no one else is providing at least half of their support.

Also, write in the name of the college for any household member who will be attending college at least half-time between July 1, 2019 and June 30, 2020, and will be enrolled in a degree, transfer or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship to Student	Name of College (if half-time attendance or more during 2019-2020)
Student Applicant		Self	Cuyamaca College

Sec	ction 2	- Independent Student's Income Infor	rmation	
i]	income Federal	A 2017 TAX RETURN - Complete this section is tax return with the IRS. You and your spouse (if tax return with all schedules to the financial aid of tax return with all schedules to the financial aid of the tax return, you must contact the tax return.	married) must provide a 2017 IRS tax office. Important Note: If you (or yo	return transcript or a copy of your ur spouse, if married) filed, or will
Che	eck the	box that applies:		
		Check here if you successfully used the IRS Data FAFSA and did not make any corrections to that		IRS income information to your
		Check here if your (and your spouse if married) your spouse (if married) filed separate IRS tax response.		
		Check here if your (and your spouse if married) and your spouse (if married) filed separate IRS to spouse		
		If you filed a joint federal return, you must al	lso provide copies of the 2017 W-2s	for you and your spouse.
		SEE LAST PAGE FOR INSTRUCTIONS	ON HOW TO ORDER A TAX RE	ΓURN TRANSCRIPT.
2.	marri	NOT AND WERE NOT REQUIRED TO FILE A ed, your spouse), will not file and are not required h your (and, if married, your spouse's), 2017 "	1 to file a 2017 income tax return with	the IRS. Note: you are required to
Che	eck the	boxes that apply:		
		You were not employed and had no income earn	ned from work in 2017.	
		Your spouse was not employed and had no income	me earned from work in 2017.	
		You (and/or your spouse, if married) were employer amount earned from each employer in 2017 and		
		Attach: a Verification of Nonfiling Letter from the of all 2017 W-2 forms issued to you and your spissue an IRS W-2 form. If more space is needed, the top.	oouse by employer(s). List every emplo	oyer even if the employer did not
Ē		Employar'a Nama	Employoo'a Nomo	Total amount assessed in
		Employer's Name	Employee's Name	Total amount earned in 2017
		Suzy's Auto Body Shop (example)	Student or Spouse	\$2,000.00(example)
-				

2019-2020 Independent Student Verification Worksheet V5(Continued)

Student ID Number:_

Student ID Number:	2019-2020 Independent Student Verification Worksheet V5(Continued)
Section 3 - Independent Student's O	Other Information
Please indicate if you or your spouse, if marri- programs:	ed, received any money or assistance in 2017 or 2018 from any of the following
☐ Supplemental Security Income (SSI)	☐ Free or Reduced Price School Lunch
☐ CalWORKs/Welfare	☐ Medicaid
☐ WIC (Women, Infants and Children's P	rogram) Supplemental Nutrition Assistance Program (formerly Food Stamps)
Section 4 – High School Completion	Status
Provide one of the following documents that i	ndicates your high school completion status when you begin college in 2019–2020:
 A copy of your General Educational the exam, or a state-authorized high so the equivalency. Credential evaluation against the equivalency. Credential evaluation against the equivalency. Credential evaluation against toward a bachelor's degree. If State law requires a homeschooled high school diploma or its recognized. If State law does not require a homest (other than a high school diploma or guardian, that lists the secondary school education in an approved homest.) 	on in a foreign country then provide verification that your high school document is a U.S. gencies can be obtained at www.naces.org . It that you successfully completed at least a two-year program that is acceptable for full student to obtain a secondary school completion credential for homeschool (other than a dequivalent), a copy of that credential. Schooled student to obtain a secondary school completion credential for homeschool its recognized equivalent), a transcript or the equivalent, signed by your parent or ool courses you completed and documents the successful completion of a secondary neschool setting.
Section 5 – Student Identity and Sta (COMPLETE THIS SECTION IN THE PRE	tement of Educational Purpose ESENCE OF A CUYAMACA COLLEGE FINANCIAL AID STAFF MEMBER)
	College Financial Aid Office to verify your identity by presenting a valid government- bired. Valid ID includes a state issued driver's license, other state-issued ID, or passport. will maintain a copy of your photo ID.
	ECTION IN THE PRESENCE OF AN AUTHORIZED ANCIAL AID STAFF MEMBER
Statement of Educational Purpose:	
I certify that I(Print Your Name) and that the Federal student financial assistance attending Cuyamaca College for 2019–2020.	am the individual signing this Statement of Educational Purpose ce I may receive will only be used for educational purposes and to pay the cost of

(Date)

(Student ID Number)

(Student's Signature)

City Section 7 – Certifica	& Street State ion and Signature , I certify that all the informati	Apt. # Zip on reported to quali	Phone Number: (EMAIL:	
Number City Section 7 – Certifica By signing this workshee	State ion and Signature , I certify that all the informati	Zip	EMAIL:	
City Section 7 – Certifica By signing this workshee	State ion and Signature , I certify that all the informati	Zip	EMAIL:	
City Section 7 – Certifica By signing this workshee	State ion and Signature , I certify that all the informati	Zip		
Section 7 – Certificates	ion and Signature , I certify that all the informati	· 		
Section 7 – Certifica By signing this workshee	ion and Signature , I certify that all the informati	· 	ify for federal student aid is c	complete and correct (
By signing this workshee	, I certify that all the informati	on reported to quali	ify for federal student aid is c	complete and correct (
By signing this workshee	, I certify that all the informati	on reported to quali	ify for federal student aid is c	complete and correct (
WARNING: If you pu	posely give false or misleading		worksheet, you may be fined	
		both.		
Student's Signature	Date	Spouse's S	Signature	Date
		Date:	Rec'd by:	

INCOME TAX INFORMATION

To obtain a FREE transcript of your income tax records or W-2(s) to include with this Worksheet:

Order online at: www.irs.gov and click on "Get a tax transcript" and then "Get Transcript Online" or "Get Transcript by Mail".

Make sure to order a **tax return transcript** and **NOT** a tax account transcript

To order by mail: Complete IRS Form 4506-T, available at www.irs.gov. Complete and mail to the address indicated on the form.

If requesting verification of nonfiling, make sure to check box 7 on the Form 4506-T.

If requesting transcript of W-2s, make sure to check **box 8** on the Form 4506-T.

YOU SHOULD MAKE A COPY OF THIS WORKSHEET FOR YOUR RECORDS.