

2019-2020 DEPENDENT AGGREGATE STUDENT VERIFICATION WORKSHEET (V5)

INSTRUCTIONS:

Your Free Application for Federal Student Aid (FAFSA) was selected for a review process called verification. **Verification must be completed before your financial aid package can be determined.** Verification requires the Financial Aid Office to confirm the information you reported on your FAFSA. Please complete **ALL** sections of this worksheet, attach all requested documentation, and sign and return to the Financial Aid Office. **Verification cannot be completed until all requested documents are received and reviewed.**

For Tax Filers - The Student Financial Aid Office highly RECOMMENDS use of the IRS Data Retrieval Tool (DRT) that is part of the FAFSA on the Web as this is the best way to verify income, and in most cases, no further documentation is needed to verify 2017 IRS income tax return information that was transferred into the FAFSA and not changed. You may order a copy of your 2017 Tax Return Transcript online at <https://www.irs.gov/individuals/get-transcript> or by phone by calling 1-800-908-9946.

A. STUDENT INFORMATION

Student Name: _____

Student ID#: _____ Date of Birth: _____

Permanent Address: _____

City/State/Zip: _____ Phone: _____

B. HOUSEHOLD INFORMATION

List in the chart below the people in the student's household. Include:

- Yourself, and your spouse if you are married;
- Your children or your spouse's children if you or your spouse will provide more than half of their support from July 1, 2019, through June 30, 2020, even if the children do not live with you;
- Other people, if they now live with you or your spouse and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2020.
- For any household member **who will be enrolled at least half time** in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2019, and June 30, 2020, include the name of the college.

Full Name	Age	Relationship to Student	College
		Self	Baptist College

C. STUDENT TAX INCOME INFORMATION

Did you file a Federal Income Tax Return for 2017? (Circle one) Yes No

1. If you answered YES, check the box that applies

- I **have used** the IRS Data Retrieval Tool to transfer my 2017 IRS income information into my FAFSA.
- I will submit my **2017 IRS tax return (SIGNATURE REQUIRED) or tax return transcript**

NOTE: If you filed separate 2017 IRS income tax returns, a 2017 IRS Tax Return must be provided for both the student and spouse.

2. If you answered NO, check the box that applies:

- I **WAS NOT** employed and had **NO** income earned from work in 2017.
- I was employed in 2017 and have listed below the names of all employers, the amount earned from each employer in 2017, and whether an IRS W-2 form is provided.

Employer's Name	2017 Amount Earned	IRS W-2 Provided?

You must also identify any untaxed income earnings including, but not limited to child support received, workers compensation, untaxed pension, etc. in the table below, if applicable.

Untaxed Income Source	2017 Amount

D. SPOUSE TAX INCOME INFORMATION

Did you file a Federal Income Tax Return for 2017? (Circle one) Yes No

1. If you answered YES, check the box(s) that applies

- My spouse **has used** the IRS Data Retrieval Tool to transfer our 2017 IRS income information into the FAFSA.
- My spouse was **unable or chose not to use** the IRS Data Retrieval Tool, and will submit our **2017 IRS tax return (SIGNATURE REQUIRED) or tax return transcript**

2. If you answered NO, check the box that applies:

- I **WAS NOT** employed and had **NO** income earned from work in 2017.
- I was employed in 2017 and have listed below the names of all employers, the amount earned from each employer in 2017, and whether an IRS W-2 form is provided.

Employer's Name	2017 Amount Earned	IRS W-2 Provided?

You must also identify any untaxed income earnings including, but not limited to child support received, workers compensation, untaxed pension, etc. in the table below, if applicable.

Untaxed Income Source	2017 Amount

E. HIGH SCHOOL COMPLETION STATUS

Please select which option describes you:

- I **DID** graduate from high school and have a high school diploma.
- I **DID** receive a GED.
- I **DID** graduate from a home school program.
- I **DID NOT** receive a high school diploma or its equivalent from any of the above sources.

If you graduated from high school, home school program or received a GED, you must provide one of the following documents that indicate your high school completion status.

- A copy of the student's high school diploma.
 - A copy of the student's final official high school transcript that shows the date when the diploma was awarded.
 - A copy of the student's General Educational Development (GED) certificate or GED transcript.
 - An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit toward a bachelor's degree.
 - If State law requires a homeschooled student to obtain a secondary school completion credential for home school (other than a high school diploma or its recognized equivalent), a copy of that credential.
 - If State law does not require a homeschooled student to obtain a secondary school completion credential for home school (other than a high school diploma or its recognized equivalent), a transcript or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and documents the successful completion of a secondary school education in a home school setting.
- Check here if you have attached one of the above documents;
 - Check here if you have previously submitted one of the above documents to the Student Admissions Office

If you are unable to obtain the documentation listed above, please contact the Student Financial Aid Office.

F. IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

*******IMPORTANT – DO NOT COMPLETE THE FOLLOWING SECTION IN ADVANCE*******

**THIS PORTION OF THE FORM MUST BE COMPLETED IN FRONT OF A
FINANCIAL AID REPRESENTATIVE OR NOTARY PUBLIC**

IDENTITY CERTIFICATION

You must appear in person at **Baptist College of Health Sciences** to verify your identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The Financial Aid Office will maintain a copy of your photo ID along with the date it was received and the name of the representative or notary authorized confirm.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I _____ am the individual signing this Statement of Educational
(print student's name)

Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending **Baptist College of Health Sciences** for 2019-2020.

(Student's Signature)

(Date)

IF SUBMITTING IN PERSON Present this form with original valid government-issued photo id. To be completed by a Financial Aid Representative:	
ID Type: _____	
ID Number: _____	Exp: _____
FA Rep Name (print); _____	
FA Rep Title: _____	
FAA Signature: _____	Date: _____

IF SUBMITTING BY MAIL (NO FAX) Send this form with photocopy of valid government-issued photo id. To be completed by Notary Public:	
State of _____	City/County _____
of _____	
On _____, before me, _____,	
(Date)	(Notary's name)
_____, personally appeared and provided to me on basis of	
(Printed name of signer)	
satisfactory evidence of identification _____ to be the above-named	
	(Type of government-issued photo ID provided)
person who signed the foregoing instrument. <u>SEAL</u>	
WITNESS my hand and official seal _____	
	(Notary signature)
My commission expires on _____	
	(Date)

G. CERTIFICATION AND SIGNATURE

Each person signing below certifies that all of the information reported is complete and correct. Please allow 7 – 10 days for processing.

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

 Student's Name (Print)

 Student's Signature (Required)

 Date (Required)

 Parent's Signature

 Date