

2015-2016 Independent Verification Worksheet – V1 Tracking Group

The federal government has selected your financial aid application for a process called verification. During verification WCC will compare information reported on your FAFSA to information on your, and your spouse's (if you're married), 2014 federal income tax transcript(s). Federal law says WCC has the right to ask you for this information before we can award you financial aid. If there are differences in information on your FAFSA and the tax transcript(s), WCC may need to make corrections to your FAFSA.

Please complete, sign this worksheet, and attach (if you have not used the IRS data retrieval tool) a copy of your and your spouse's (if you're married) 2014 federal income tax return transcript.

Name	Student ID Number	Phone Number
	@	

Family Information

List the people in your household, including:

1. Yourself.
2. Your spouse, if you have one.
3. Your children, even if they do not live with you, if you will provide more than half of their support from July 1, 2015, through June 30, 2016.
4. Other people if they currently live with you and you provide more than half of their support, and will continue to provide more than half of their support from July 1, 2015 through June 30, 2016.

Full Name	Age	Relationship:	College Attending (at least half time) 7/1/15 – 6/30/16
		Self	Washtenaw Community College

Student Income

If you were **not required** to file a 2014 federal income tax return, please list all sources of income, the amount(s) earned and provide copies of your W2 form(s).

Source of Income	Amount Earned in 2014
	\$
Did you attach a W2?	
<input type="radio"/> Yes	<input type="radio"/> No
If No, Explain	

Spouse Income

If you were **not required** to file a 2014 federal income tax return, please list all sources of income, the amount(s) earned and provide copies of your W2 form(s).

Source of Income	Amount Earned in 2014
	\$
Did you attach a W2?	
<input type="radio"/> Yes	<input type="radio"/> No
If No, Explain	

Verification of SNAP Benefits (Food Stamps)

Did you, your spouse, or a member of your household, receive benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2013 or 2014?		
<input type="radio"/> No	<input type="radio"/> Yes	
If yes, then provide the name of recipient, age, and relationship to the student. (If more space is needed, please attach a separate page.)		
Name	Age	Relationship

Verification of Child Support Paid

Did you or your spouse pay child support in 2014?		
<input type="radio"/> No	<input type="radio"/> Yes	Name of the person who paid child support
If yes, please certify: (If more space is needed, please attach a separate page.)		
Name of person to whom child support was paid	Name and age of child	2014 Total Paid

By signing this document, you certify that the information reported is complete and correct. If you purposely give false or misleading information, you may be fined, be sentenced to jail, or both. If it appears the information in this document is inaccurate, we may ask you to submit additional documents to verify this information.	
Student Signature	Date
Spouse Signature (optional)	Date