

2017-2018 Verification Document Independent Student - Tracking Group V1

Your 2017-2018 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 and your parents 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. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed. Requests for additional information will be sent to your home address. Please ensure the address on file at Robeson Community College is correct to ensure delivery of such requests.

St	tudent's Last Name	Student's First Name	Student's M.I.	Student's SSN or ID Number	
Si	Student's Street Address (include apt. no.)			Student's Date of Birth	
C	ity	State	Zip Code	Student's Email Address	
SI	tudent's Home Phone Nu	mber (include area code)		Student's Alternate or Cell Phone Number	
udent's	s Family Information				
	s Family Information w the people in your h	ousehold. Include:			
	-				
	w the people in your h)			
	ow the people in your h Yourself. (Parent 1 Your Spouse, if you)			
	ow the people in your h Yourself. (Parent 1 Your Spouse, if you Parent 2, If unman You children if you) u are married, ried and they live in the home. will provide more than half of their s rmation if they were completing a F		ough June 30, 2018, or if the child would be required children who meet either of these standards, even	

Include the name of the college for any household member, excluding your parent(s), who will be enrolled, **at least half time** in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2017, and June 30, 2018. *If more space is needed, attach a separate page with the student's name and Social Security Number at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
Missy Jones (example)	18	Self	Anywhere University (example)	Yes

Student	Name:		Student I	D Number:			
C. Stud	ent's Inco	me Information to Be Verified		Check only one box.			
1.	TAXRE	TURNFILERS					
	Important Note: If the student filed, or will file, an <u>amended</u> 2015 IRS tax return, the student must contact the financial aid administrator before completing this section.						
by using the IRS Data Retrieval Tool that is pa to the student's FAFSA record, select "Make Fa follow the instructions to determine if the stud information into the student's FAFSA. It takes		g the IRS Data Retrieval Tool that is pa udent's FAFSA record, select "Make FA ne instructions to determine if the stude tion into the student's FAFSA. It takes nic IRS tax return filers, and up to eight	udent, filed or will file a 2015 income tax return with the IRS. The best way to verify income is part of FAFSA on the Web. If the student has not already used the tool, go to FAFSA.gov, log in FAFSA Corrections," and navigate to the Financial Information section of the form. From there, dent is eligible to use the IRS Data Retrieval Tool to transfer 2015 IRS income tax is up to two weeks for IRS income information to be available for the IRS Data Retrieval Tool for the tweeks for paper IRS tax return filers. If you need more information about when, or how to ancial aid administrator.				
	Check t	he box that applies:					
			ne initial FAFSA or when making a correction t	eve and transfer 2015 IRS income information to the FAFSA. <i>The student's school will use the IRS</i>			
		2015 IRS income information into the	e student's FAFSA once the student has filed 'S <i>Data Retrieval Tool. The student's school</i> (b, but will use the tool to retrieve and transfer a 2015 IRS tax return. See instructions above cannot complete the verification process until the			
		school a 2015 IRS tax return trans www.IRS.gov and click on the "Get" transcript" and not the "IRS tax acco address on file with the IRS (norma	script—not a photocopy of the income tax re Transcript ONLINE" link, or call 1/800/908-99 ount transcript." You will need your Social Se	curity Number, date of birth, and the 115 IRS tax return was filed). It takes up to two			
		☐ Check here if the student	's IRS tax return transcript is attached to this vis IRS tax return transcript will be submitted to Stax return transcript has been submitted to	the student's school later. Verification cannot			
2.	TAXRE	TURN NONFILERS					
	Complete this section if the student will not file and is not required to file a 2015 income tax return with the IRS. Check the box that applies:						
	☐ The student was not employed and had no income earned from work in 2015.						
	(Student must attach the Low Income Form to verify household assets for 2015).						
		□ The student was employed in 2015 and has listed below the names of all the student's employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is attached. Attach copies of all 2015 IRS W-2 forms issued to the student by employers. List every employer even if they did not issue an IRS W-2 form. If more space is needed, attach a separate page with the student's name and Social Security Number at the top.					
		Employee's News	204 E. A mayort	IDC W 2 Attached 2			
		Employer's Name	2015 Amount \$1.280	IRS W-2 Attached?			

Student Name:

Employer's Name	2015 Amount	IRS W-2 Attached?
ABC Shipping (example)	\$1,280	Yes

Certification and Signatures	WARNING: If you purposely give false or misleading Information on this document, you may be fined, be sentenced to jail, or both.
Each person signing this document certifies that all of the information reported on it is complete and correct. The student (spouse optional) nust sign and date.	
Student's Signature	Date
Spouse's Signature (Optional)	Date
	cument to the U.S. Department of Education. to the financial aid administrator at your school.
You should make	e a copy of this document for your records.
Robeson Community College / Fi	inancial Aid Office / PO Box 1420 Lumberton, NC 28360
Completed form may be fa	axed to 910.272.3314 or emailed to finaid@robeson.edu