

Dependent Verification Worksheet Dep - V5 2015-2016

Financial Aid signature required

Please read the entire form, complete ALL sections, attach the requested documentation, sign the form, and return to the Financial Aid Office. By law, Mesalands Community College (MCC) has the right to request this information before awarding financial aid. If there are differences between the information submitted and your Free Application for Federal Student Aid (FAFSA) the school will make the necessary changes. Incomplete worksheets and documentation will cause delays in processing your financial aid. No determination of aid eligibility can be made until all documents are received and reviewed.

Part 1. Student Information:					
First Name:	Last Name:		Student ID:		
Address:			Date of Birth:		
City, State, Zip:			Phone:		
orty, otato, zip.			i none.		
Mesalands E-mail add	ress:		_@mesalands	s.net	
Part 2. Student & Parent Tax Infor	mation:				
Completing the FAFSA requires using tax info IRS Data Retrieval Option was used and you n				system. If the	
If you and/or your parents did not use the IRS service. After you complete this step check the			update the FAFS	A using the IRS	
If you and/or your parents did not or could not	t use the IRS Data R	etrieval option vou must pr	ovide our office v	vith a copy of tax	
return transcripts. Tax return transcripts can to	take two or more we	eks to arrive. Your 2014 tax	return transcript		
ordered by calling (800) 908-9946 or online at	<u>www.irs.gov</u> . Other	tax forms will NOT be acce	pted.		
STUDENT: Mark the line that best applies. For	ollow the instruction	s. Attach documents if requ	uired.		
1. <u>Did the student file a 2014 federal tax</u>	return? YES		go to 1.a.	L	
4 - Did the student was the IDO Date	·		kip to question 1	.D.	
1.a. Did the student use the IRS Data YES If "yes," go t	Retrieval option to the to the to the total transfer transfer to the transfer		SA?		
NO If "no," <u>attac</u>	ch a copy of the IRS	tax return transcript (see di	irections above) a	and go to	
question 2 in	n the parents section	n.			
1.b. Even if the student did not file a			y income in 2014	?	
	in the box below and o parents section.	d attach all W2 forms.			
	- paronto ocotioni				
Name of employers in 2014		Total amount earned in 20		ned?	
1.		\$	Yes	No No	
<u>2.</u> 3.		\$ \$	Yes Yes	No No	
ja ja vest in the second of th					
PARENT(s): Mark the line that best applies. F	Follow the instruction	ns. Attach documents if red	guired.		
PARENT(s): Mark the line that best applies. Follow the instructions. Attach documents if required.					
2. Did the parent(s) file a 2014 federal tax return? YES If "yes," go to 2.a. NO If "no," skip to question 2.b.					
2.a. Did the parent(s) use the IRS Data Retrieval option to complete or update the FAFSA?					
YES If "yes," go to Part 3.					
NO If "no," <u>atta</u>	ch a copy of the IRS	tax return transcript (see d	lirections above)	and go to Part 3.	
2.b. Even if the parent(s) did not file a			any income in 20	14?	
YES If "yes," fill NO If "no," go t		d attach all W2 forms.			
Name of employers in 2014		Total amount earned in 20°	14 Is W2 Attacl	ned?	
1.		\$	Yes	No	
2.		\$	Yes	No No	
3.		\$	Yes	No	
4.		\$	Yes	No	

Part 3. Family Information:

List the persons in your parent's household in the chart below. Include the following:

- Yourself, even if you don't live with your parents (i.e. living in an apartment, with friends, etc.).
- Your parent(s) in the household, including your stepparent.
- 3. Your parents' other children if your parents will provide more than half of the other children's support from July 1, 2015 to June 30, 2016.
- 4. Other people if they now live with your parents and your parents provide more than half of their support and will continue to provide more than half their support from July 1, 2015 to June 30, 2016. Also, identify the name of the college for any family member (except your parents) who will be attending college between July 1, 2015 and June 30, 2016 and will be enrolled at least half-time (6 or more credit hours) in a degree or certificate program. If you need more space add a separate page.

First and Last Name*	Age	Relationship	Name of College in 2015-2016**	Enrolled at least ½ time
Example: Martha Jones	19	Sister	Fort Lewis	Yes
1. (Student):		SELF		
2.				
3.				
4.				
5.				
6.				

^{*}Proof of financial support may be requested.

Part 4.	Additiona	al Inform	nation
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Part 4. Additional Information:	
A. SNAP (Food Stamps) received	in 2013 and/or 2014
	Nutrition Assistance Program (SNAP) benefits hat the information is inaccurate we will require ued the SNAP benefits in 2013 and/or 2014.
B. Child Support Paid	d in 2014
On your FAFSA, you indicated that one or both of your parents paid child	support in 2014. Please answer the following question
1. Did one of your parents listed in Part 3 pay child support in 2014?	YES If "yes," you MUST answer 2 -5. NO If "no," skip to Part 5.
 Write the TOTAL amount actually paid in all of 2014*: Name of person who paid child support in 2014: Name the person to whom child support was paid: List the children for whom the child support is intended: 	\$
*If the figure differs from what was reported on the FAFSA further documents, etc.) may be requested.	documentation (cancelled checks, legal

fari 5. Student 5 Pro	oi oi migii sch	ooi Completion.

Part 5. Student's Proof of High School Completion:
he school must have documentation the student completed high school or its accepted equivalent.
 Did you previously submit documentation of high school, home school, or GED completion to MCC? YES If 'yes,' initial the statement below.
Student initials: I previously submitted a copy of my official high school transcript, GED or homeschool credential to MCC. If, upon review, this document is not sufficient I will submit additional required documentation.
NO If 'no' go to the list below and SELECT ONLY ONE of the following choices, CHECK the line, and ATTACH A COPY of the form.
Final official high school transcript showing graduation dateGED certification
An acceptable homeschool completion credential meeting New Mexico and MCC requirements
If you cannot provide one of these documents please contact the Financial Aid Office.

^{**}Proof of enrollment in 2015-2016 may be requested.

Part 6. Documentat 1. How will you sub		In-person_	If "in	-person," follow direction	
		By mail	If "by	y mail," follow directions	s in Box B
BOX A: Complete 1 and 2	below and submit t	his form in-person.	Bring your	government issued pho	to ID with you.
	adable copy of the s	tudent's governme	nt issued ph	oto ID (driver's license,	passport, military
.D, 0.0.,. 00pj 0.		NO		If "no," verification is you will not be awar	
2. Read and sign the	e following statemer	nt of purpose.			
of Educational Pu	irpose and that the f	ederal student fina	ıncial assista	e) am the individual sig nce I may receive will o ommunity College for 20	nly be used for
Student Signatur	e:		Date:	Student ID:	
•	form with Notary's si	ignature and seal o	or stamp to th	e MCC Financial Aid Off	fice.
1. Attach a clear, re	adable copy of the someone in the some of	tudent's governme d:	nt issued ph	oto ID (driver's license,	passport, military
, o,. oop, o.	photo ID is attached	NO		If "no," verification is you will not be awar	s incomplete and rded financial aid.
2. Read and sign the	e following statemer	nt of purpose in fro	nt of a Notary	y.	
of Educational Pu	irpose and that the f	ederal student fina	ncial assista	e) am the individual sign nce I may receive will on ommunity College for 20	nly be used for
Student Signatur	e:	D	ate:	Student ID:	
In the State of(Notary's name)	and (city/county of		on (date)	, before me
and provided me on basis to be the above named po Witness my hand and off	s of satisfactory evic erson who signed th	dence identification e foregoing instrur	ı (<i>type of gov</i>	nt name) ''t issued photo ID)	
Notary Signature:			Date:		
My commission expires o	on this date:				
YOU MUST SUBMIT TO		RSON OR BY MAI	L WITHIN T	WO WEEKS. E-MAIL	AND FAXES
, , ,	e parent must also	sign.) Warning: I	f you purpos	d on this worksheet is osely give false or misles	•
Student Signature	Dat	te	Parent Sig	gnature	Date
		Nlamas -4	f Einoppiel Aid	Stoff Momban	
				Staff Member:	
		Signature of	Financial Aid	Staff Member:	

Date received all documents: