

SOLANO COMMUNITY COLLEGE - FINANCIAL AID OFFICE 4000 Suisun Valley Road, Student Services Bldg. 400, Fairfield, CA 94534 Phone: (707) 864-7103 • Fax: (707) 646-2071 • www.solano.edu, Financial Aid

2016 – 2017 Custom Verification Form

Your application was selected for a information from your FAFSA with information before awarding Feder documents, the college will make to	your 2015 IRS tax information. al aid. If there is a difference be	The lav	v gives the	college the rig	ght to ask you for this	
Complete this verification form and cannot process your application w		dminist	rator as so	on as possible	e. The financial aid office	
Student Information						
Last Name:	First Name: M.I.		SCC ID #			
Date of birth:	Phone number:	one number: Social Security Number		rity Number		
□ Dependent Student*			☐ Independent Student**			
*A student is considered dependent if he/she was required to provide parental information on the FAFSA.			**A student is considered independent if he/she was not required to provide parental information on the FAFSA.			
Eggd Stampa Varification						
Food Stamps Verification						
In 2014 or 2015, did you, your pare	nts, or anyone in your/parents ho	usehol	d receive Fo	ood Stamps?	☐ Yes ☐ No	
Note: If we have reason to believe that the information regarding the receipt of Food Stamp benefits is inaccurate, we may require documentation from the agency that issued the Food Stamp benefit in 2014 or 2015.						
Obild Owner and Daild						
Child Support Paid						
If you, your parent(s), or spou below information.			•	•		
Name of person who paid child support	Name of child for whom child support was paid	Amou	int of child s in 201	support paid 5	Name of person/agency to whom child support was paid	



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Stuc	Student – High School Completion Status				
Provide one of the following documents that indicate your high school completion status when you will begin college in 2016–2017:					
	I have a High School Diploma ☐ I am attaching a copy of my High School Diploma ☐ I am attaching a copy of my final High School transcript, which includes that date I completed High School				
	I have a GED ☐ I am attaching a copy of my GED Certificate ☐ I am attaching a copy of my GED Transcript				
	I received a State Certificate ☐ I am attaching the certificate recognized by California State as an equivalent to a diploma				
	I was Home Schooled ☐ I am attaching a signed copy of my transcript or equivalent				
	 I have none of the above □ I am attaching a signed statement from my High School stating I excelled academically □ I am attaching an academic transcript that indicates the I successfully completed at least a two-year program that is acceptable for full credit toward a bachelor's degree 				
Stu	ident – Identity Verification				
☐ I am appearing in person with my valid government-issued photo identification (driver's license, state identification card, military identification, or passport). Financial Aid office will maintain a copy of your photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect your ID.					
	FAO use only: □ Made copy □ Date Stamped □ Staff Initials				
☐ I cannot appear in person, I am mailing the attached notarized copy of my valid government-issued photo identification (driver's license, state identification card, military identification, or passport)					
Stat	ement of Educational Purpose				
Stat	tify that I am the individual signing this (Print Student's Name) ement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending Solano Community College for 2016-2017.				
(Stu	dent's Signature) (Date)				
(Stu	dent's ID Number)				



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Notary's Certificate of Acknowledgement	
State of	
City/County of	
On, before me,(Notary's	name)
personally appeared,(Printed name of signer)	, and proved to me
on basis of satisfactory evidence of identification(Type of government	t-issued photo ID provided)
to be the above-named person who signed the foregoing instrument.	
WITNESS my hand and official seal(Notary signature	(Seal)
My commission expires on(Date)	
Attn: Notary section is only for students who cannot subm	nit identification in person. Faxed copies will not be accepted
Sign the Worksheet	
knowledge. I agree that I have reviewed, understand and agre	ner financial aid documents is true and correct to the best of my e to the conditions, responsibilities and obligations in order to ed in the Award Terms and Conditions and Satisfactory Academic
Student Signature	Parent/Spouse (dependent student)
Date	Data .