



2016–2017 Independent Aggregate Verification Form

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) and/or California Dream Application 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 reported on your FAFSA/California Dream Application. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA/California Dream Application with the information on this worksheet and with any other required documents. If there are differences, your FAFSA/California Dream Application information may need to be corrected. You 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.

Independent Student's Information

Student's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number
Student's Street Address (include apt. no.)			Student's SCCID #
City	State	Zip Code	Student's Email Address
Student's Date of Birth	Student's Home Phone # (inc. area code)	Student's Alternate or Cell Phone #	

A. Independent Student's Family Information

List below the people in your household, include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the child would be required to provide your information if they were completing a FAFSA/California Dream Application for 2016–2017. Include children who meet either of these standards, even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.

Include the name of the college for any household member 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, 2016, and June 30, 2017. *If more space is needed, attach a separate page with your name and Social Security Number at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
<i>Marty Jones(example)</i>	28	<i>Wife</i>	<i>Central University</i>	<i>Yes</i>
		<i>Self</i>	<i>Solano Community College</i>	

B. Independent Student's Income Information to Be Verified - fill out appropriate section:

1. **TAX RETURN FILERS**—**Important Note:** If you (or your spouse, if married) filed, or will file, an amended 2015 IRS tax return, you must contact your financial aid administrator before completing this section.

Instructions: Complete this section if you, the student, filed or will file a 2015 income tax return with the IRS. *The best way to verify income is by using the IRS Data Retrieval Tool that is part of FAFSA on the Web. If you have not already used the tool, go to FAFSA.gov, log in to your FAFSA record, select "Make FAFSA Corrections," and navigate to the Financial Information section of the form. From there, follow the instructions to determine if you are eligible to use the IRS Data Retrieval Tool to transfer 2015 IRS income tax information into your FAFSA. It takes up to 2-3 weeks for IRS income information to be available for the IRS Data Retrieval Tool for electronic IRS tax return filers, and up to 8-11 weeks for paper IRS tax return filers. If you need more information about when, or how to use the IRS Data Retrieval Tool see your financial aid administrator.*

Check the box that applies:

I, the student, have used the IRS Data Retrieval Tool in FAFSA on the Web to transfer my (and, if married, my spouse's) 2015 IRS income information into my FAFSA, either on the initial FAFSA or when making a correction to the FAFSA. *Your school will use the IRS information that was transferred in the verification process.*

I, the student, am unable or choose not to use the IRS Data Retrieval Tool on the FAFSA/California Dream Application **my IRS tax return transcript(s) is attached to this worksheet.**

To obtain an IRS tax return transcript, go to www.irs.gov and click on the "Order a Return or Account Transcript" link, or call 1-800-829-1040. Make sure to request the "IRS tax return transcript" and not the "IRS tax account transcript." You will need your Social Security Number, date of birth, and the address on file with the IRS (normally this will be the address used when your 2015 IRS tax return was filed). It takes up to 2-3 weeks for IRS income information to be available for electronic IRS tax return filers, and up to 8-11 weeks for paper IRS tax return filers. If you are married and you and your spouse filed separate 2015 tax returns, you must submit tax return transcripts for both you and your spouse.

2. **TAX RETURN NONFILERS**—Complete this section if you, the student (and, if married, your spouse), **will not file and are not required to file** a 2015 income tax return with the IRS.

Check the box that applies:

The student (and, if married, the student's spouse) was not employed and had no income earned from work in 2015.

The student (and/or the student's spouse if married) was employed in 2015 and has listed below the names of all employers, the amount earned from each employer in 2015.

Attach copies of all 2015 W-2 forms issued to you (and, if married, to your spouse) by employers. *List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, attach a separate page with your name and SSN at the top.*

Employer's Name	2015 Amount Earned	IRS W-2 Attached?
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00</i>	<i>Yes</i>

C. Food Stamps (SNAP) Verification

1. Complete this section if someone in the student's household (listed in Section B) received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2014 or 2015 calendar years.

One of the persons listed in Section B of this worksheet received SNAP benefits in 2014 or 2015. If asked by my school, I will provide documentation of the receipt of SNAP benefits during 2014 and/or 2015.

D. Child Support Paid Verification

No Child support was *paid* in 2015.

Either I, or if married my spouse who is listed in Section B of this worksheet, *paid* child support in 2015. Complete chart below.

If asked by my school, I will provide documentation of the payment of child support. *If you need more space, attach a separate page that includes your name and Social Security Number at the top.*

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Annual Amount of Child Support Paid in 2015
<i>Marty Jones(example)</i>	<i>Chris Smith</i>	<i>Terry Jones</i>	<i>\$6,000.00</i>

E. Student's 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

F. Student's 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).

I certify that I _____ am the individual signing this
(Print Student's Name)

Statement of Educational 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 Solano Community College for 2016-2017.

(Student's Signature)

(Date)

(Student's ID Number)

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,
(Date) (Notary's name)

personally appeared, _____, and proved to me
(Printed name of signer)

on basis of satisfactory evidence of identification _____
(Type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal _____
(Seal)

(Notary signature)

My commission expires on _____
(Date)

Attn: Notary section is only for students who cannot submit identification in person. Faxed copies will not be accepted.

G. Certification and signatures

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married, the spouse's signature is optional.

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

Student's Signature

Date

Spouse's Signature

Date

*Attn: Faxed copies will not be accepted. Originals must be submitted.
Do not mail this worksheet to the U.S. Department of Education.
You should make a copy of this worksheet for your records.*