

LEAVE NOTHING BLANK

FOR OFFICE USE ONLY			
STAMP HERE			
CAMPUS:	INITIAL:		
C	D	E	OM

2022 – 2023: Dependent Verification Worksheet

Your application was selected for a process called verification. In this process, the school will compare the information provided on this form and other requested documents with your FAFSA data. If there are differences between your FAFSA information and financial documents, your FAFSA data will be corrected. **YOU MUST COMPLETE ALL SECTIONS.**

A. Household Size Information Complete the table below. Attach a separate sheet if more space is needed.

1. Yourself (student)	
FULL NAME	CCBC ID NUMBER

2. Your Parent(s)/Step-Parent(s) – LIST BELOW...

- **If your biological parents are divorced, separated, or unmarried, only** report information on the parent you lived with the most during the last 12 months *and his/her spouse*, if he/she is currently married.
- **If your parent(s) are married or remarried OR unmarried, but live together,** report *both* parents, or parent *and spouse*
- **If, within the last year, you did not live with either parent OR lived with both equally,** report information for *the parent who provided the most financial support during the last 12 months and his/her spouse*, if he/she are currently married.
- **If you have not lived with or received support from either parent for more than a year,** provide information on *the parent you lived with last or from whom you last received financial support and his/her spouse*, if he/she are currently married.

PARENT'S FULL NAME:	AGE:	RELATIONSHIP TO STUDENT:	FULL NAME OF <i>CURRENT</i> COLLEGE/UNIVERSITY: Leave blank if not attending COLLEGE at least half time between 7/1/22 and 6/30/23.

3. Your Siblings – LIST BELOW...

Your Parents'/Step-Parents' other children (ONLY biological/adopted/stepchildren): If your parents will provide more than 50% of their support from 7/1/22 through 6/30/23 OR if the children would be required to provide parental information if they were completing a FAFSA application.

SIBLING'S FULL NAME:	AGE:	RELATIONSHIP TO STUDENT:	FULL NAME OF <i>CURRENT</i> COLLEGE/UNIVERSITY: Leave blank if not attending COLLEGE at least half time between 7/1/22 and 6/30/23.

4. Other people – LIST BELOW...

Other people: If they now live with your parents AND your parents will provide more than 50% of their financial support AND will continue to provide more than 50% of their support from 7/1/22 through 6/30/23.

YOU MUST ATTACH PROOF OF DEPENDENT WORKSHEET(S) *AND* PROOF OF CURRENT ADDRESS FOR EACH PERSON LISTED BELOW

PERSON'S FULL NAME:	AGE:	RELATIONSHIP TO STUDENT:	FULL NAME OF <i>CURRENT</i> COLLEGE/UNIVERSITY: Leave blank if not attending COLLEGE at least half time between 7/1/22 and 6/30/23.

STUDENT NAME: _____ CCBC ID: _____

B. Parent marital status In reference to the parent(s) listed in A.2, select the **CURRENT** marital status. Check **ONE**

- Separated** (Legally married, living separately from spouse) – Date of separation: ____ / ____ / ____
- Legally Divorced** (NOT remarried) – Date of divorce: ____ / ____ / ____
- Widowed** (NOT remarried) – Date of widowed status: ____ / ____ / ____
- Married** (biological/adoptive parents)/**Remarried** (parent and stepparent) – Date of marriage: ____ / ____ / ____
- Parent **NEVER** Married (to anyone) **OR** Both biological parents are **unmarried, but living together**

C. 2019 Tax Filing/Employment Status

STUDENT	PARENT (s)																
<p>1. DID YOU (STUDENT) FILE A FEDERAL TAX RETURN IN 2020?</p> <p><input type="checkbox"/> NO, I did not file and was not required to file a tax return in 2019. <u>READ THE BELOW CAREFULLY</u> (complete below) <input checked="" type="checkbox"/></p> <p>1A. DID YOU WORK IN 2020?</p> <p><input type="checkbox"/> No, I did not work at all in 2020</p> <p><input type="checkbox"/> Yes, I did work in 2020 (COMPLETE BELOW) </p> <div style="border: 1px solid black; padding: 2px; margin: 5px 0;"> <p> YOU MUST COMPLETE BELOW <u>AND</u> ATTACH ALL 2020 W-2(s)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">NAME OF EMPLOYER(s)</th> <th style="width: 30%;">TOTAL EARNED IN 2020</th> </tr> </thead> <tbody> <tr> <td> </td> <td style="text-align: right;">per year</td> </tr> <tr> <td> </td> <td style="text-align: right;">per year</td> </tr> <tr> <td> </td> <td style="text-align: right;">per year</td> </tr> </tbody> </table> </div> <p><input type="checkbox"/> YES, I filed a federal tax return (check ONE below) <input checked="" type="checkbox"/></p> <p> <input type="checkbox"/> I am attaching a signed and dated copy of my 1040 (including schedules) OR Tax Return Transcript (obtained from the IRS – www.irs.gov)</p> <p><input type="checkbox"/> I used the IRS Data Retrieval Tool (DRT) on my FAFSA</p>	NAME OF EMPLOYER(s)	TOTAL EARNED IN 2020		per year		per year		per year	<p>1. DID YOU (PARENT) FILE A FEDERAL TAX RETURN IN 2020?</p> <p><input type="checkbox"/> NO, I did not file and was not required to file a tax return in 2019. <u>READ THE BELOW CAREFULLY</u></p> <p>YOU MUST ATTACH 2019 VERIFICATION OF NON-FILING</p> <p> Use IRS Form 4506-T - www.irs.gov (or SIMON). Check Box #7. Send to IRS – submit mailed response to Financial Aid.</p> <p style="text-align: right;">(complete below) <input checked="" type="checkbox"/></p> <p>1A. DID YOU WORK IN 2020?</p> <p><input type="checkbox"/> No, I did not work at all in 2020</p> <p><input type="checkbox"/> Yes, I did work in 2020 (COMPLETE BELOW) </p> <div style="border: 1px solid black; padding: 2px; margin: 5px 0;"> <p> YOU MUST COMPLETE BELOW <u>AND</u> ATTACH ALL 2020 W-2(s)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;">NAME OF EMPLOYER(s)</th> <th style="width: 30%;">TOTAL EARNED IN 2020</th> </tr> </thead> <tbody> <tr> <td> </td> <td style="text-align: right;">per year</td> </tr> <tr> <td> </td> <td style="text-align: right;">per year</td> </tr> <tr> <td> </td> <td style="text-align: right;">per year</td> </tr> </tbody> </table> </div> <p><input type="checkbox"/> YES, I filed a federal tax return (check ONE below) <input checked="" type="checkbox"/></p> <p> <input type="checkbox"/> I am attaching a signed and dated copy of my 1040 (including schedules) OR Tax Return Transcript (obtained from the IRS – www.irs.gov)</p> <p><input type="checkbox"/> I used the IRS Data Retrieval Tool (DRT) on my student's FAFSA</p>	NAME OF EMPLOYER(s)	TOTAL EARNED IN 2020		per year		per year		per year
NAME OF EMPLOYER(s)	TOTAL EARNED IN 2020																
	per year																
	per year																
	per year																
NAME OF EMPLOYER(s)	TOTAL EARNED IN 2020																
	per year																
	per year																
	per year																

Student's Signature _____

Date _____

Parent's Signature _____

Date _____

Warning: Each person signing this worksheet certifies that they have read and understood all questions, and that all the information reported is complete and accurate. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Please allow *at least* 2-3 weeks after ALL documents submitted for review. Check your SIMON account for status updates.
All documents must be submitted by the last day of the semester. Financial aid awards are subject to change pending verification.