

**2018 - 2019 Dependent Student Verification Form**

Your 2018-2019 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 must ask you to confirm the information you reported on your FAFSA. Data will be compared from your FAFSA application with this form, 2016 Income Tax information and any other requested information for both you and parent(s). Complete and sign this document and submit with other required documents. Respond quickly so that your financial aid will not be delayed.

**A. Student's Information**

Student's Last Name	First Name	M.I.	Last 4 digits of SS Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City, State Zip Code ( )			Student's Email Address ( )
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number

**B. Dependent Student's Family Information**

List below the names of all household members, including yourself. 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 certificated program at an eligible postsecondary educational institution any time between July 1, 2018 and June 30, 2019.

List the people in your parent's household, include:

- a. Yourself and your parent(s) (including stepparent) even if you don't live with your parents/stepparents
- b. Your parents' other children, even if they don't live with your parent(s), if 1. Your parents provide more than half of their support from July 1, 2018 through June 30, 2019 or 2. they would have to provide parental information when applying for aid
- c. Other people if they now live with your parent(s) if your parent(s) provide more than half of their support and will continue to do so from July 1, 2018 through June 30, 2019

*If more space is needed, provide a separate page with the student's name and DOB at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes)
1.		<i>Self</i>	<i>Cabarrus College of Health Sciences</i>	
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

**C. Verification of 2016 Income Tax Information**

The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web at [FAFSA.gov](http://FAFSA.gov). In most cases, no further documentation is needed to verify 2016 income information that was transferred into the student’s FAFSA using the IRS DRT if that information was not changed by the FAFSA filer.

Check the one box that applies FOR THE STUDENT:	Check the one box that applies FOR THE PARENT:																														
<input type="checkbox"/> The student filed a 2016 Federal Tax Return and used the IRS DRT in FAFSA on the Web to transfer the 2016 IRS income tax return information into the FAFSA.	<input type="checkbox"/> The parent(s) filed a 2016 Federal Tax Return and used the IRS DRT in FAFSA on the Web to transfer the 2016 IRS income tax return information into the FAFSA.																														
<input type="checkbox"/> The student was <u>unable or chose not to use</u> the IRS DRT in FAFSA on the Web, and instead is providing the school with a <b>2016 IRS Tax Return Transcript(s) and copies of all 2016 W-2 forms.</b> * See notes below	<input type="checkbox"/> The parent(s) were <u>unable or chose not to use</u> the IRS DRT in FAFSA on the Web, and instead is providing the school with a <b>2016 IRS Tax Return Transcript(s) and copies of all 2016 W-2 forms.</b> * See notes below																														
<input type="checkbox"/> The student <u>did not file</u> a 2016 Federal Tax Return, was not employed and had no income earned from work in 2016.	<input type="checkbox"/> The parent(s) <u>did not file</u> a 2016 Federal Tax Return, were not employed and had no income earned from work in 2016. *Confirmation of Non-filing letter must be obtained from the IRS. * See notes below																														
<input type="checkbox"/> The student <u>did not file</u> a 2016 Federal Tax Return, but the student and/or spouse were employed in 2016 and have listed below the names of all employers, the amount earned from each employer in 2016, and whether an IRS W-2 form is provided. [Provide copies of all 2016 IRS W-2 forms issued to the student and spouse by their employers]. List every employer even if the employer did not issue an IRS W-2 form. If you have lost any of your W-2 forms, you may order a Wage and Income Transcript directly from the IRS online at <a href="http://www.irs.gov">www.irs.gov</a> . * See notes below	<input type="checkbox"/> The parent(s) <u>did not file</u> a 2016 Federal Tax Return, but the parent(s) were employed in 2016 and have listed below the names of all employers, the amount earned from each employer in 2016, and whether an IRS W-2 form is provided. [Provide copies of all 2016 IRS W-2 forms issued to the student and spouse by their employers]. List every employer even if the employer did not issue an IRS W-2 form. If you have lost any of your W-2 forms, you may order a Wage and Income Transcript directly from the IRS online at <a href="http://www.irs.gov">www.irs.gov</a> . *Confirmation of Non-filing letter must be obtained from the IRS. * See notes below																														
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**\*How to obtain a 2016 IRS Tax Return Transcript or 2016 Confirmation of Non-Filing Letter**

**2016 Tax Return Transcript**

- Get Transcript ONLINE or By MAIL – <https://www.irs.gov/individuals/get-transcript> Request the “IRS Tax Return Transcript”
- Automated Telephone Request – 1-800-908-9946.

**2016 Verification of Non-filing Letter**

- Paper Request Form – IRS Form 4506T-EZ or IRS Form 4506-T.

**D. High School Completion Status**

Provide one of the following documents to indicate the student’s high school completion status when the student begins college in 2018–2019:

- A copy of the student’s high school diploma.
- For students who completed secondary education in a foreign country, a copy of the “secondary school leaving certificate” or other similar document.
- A copy of the student’s final official high school transcript that shows the date when the diploma was awarded.
- A State certificate or transcript received by a student after the student passed a State-authorized examination that the State recognizes as the equivalent of a high school diploma (GED test, HiSET, TASC, or other State-authorized examination).
- An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit toward a bachelor’s degree.

-Continued-

Students Name: \_\_\_\_\_

Students DOB \_\_\_/\_\_\_/\_\_\_

- For a student who was homeschooled in a State where State law requires the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized equivalent), a copy of that credential.
- For a student who was homeschooled in a State where State law does not require the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized equivalent), a transcript, or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and includes a statement that the student successfully completed a secondary school education in a homeschool setting.

A student who is unable to obtain the documentation listed above must contact the financial aid office.

**E. Identity and Statement of Educational Purpose--- (To Be Signed at the Institution)**

The student must appear in person at Cabarrus College of Health Sciences to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

**F. Identity and Statement of Educational Purpose--- (To Be Signed in the Presence of a Notary)**

If the student is unable to appear in person at Cabarrus College of Health Sciences to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and
- (b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

**G. Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this 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 Cabarrus College of Health Sciences for 2018–2019.

(Print Student's Name)

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 Cabarrus College of Health Sciences for 2018–2019.

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Student's ID Number)

**H. Certification and Signatures**

- Each person signing below certifies that all of the information reported is complete and correct.
- By signing this form, I (we) also authorized Cabarrus College of Health Sciences to make any changes to the originally reported FAFSA data that result from the Verification process.

**Warning: If you purposely give false or misleading information you may be fined, sent to prison or both.**

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Last 4 digits of SS Number

\_\_\_\_\_  
Student's Signature (Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature (Required)

\_\_\_\_\_  
Date

**Do not mail this worksheet to the U.S. Department of Education.**

**You may submit the verification and requested forms to: Cabarrus College of Health Sciences - Attention: Robin Robinson  
401 Medical Park Drive Concord, NC 28025 Phone (704) 403-2445 Fax (704) 403-2077**