



2017-2018 Verification Worksheet

Federal Student Aid Programs

College of Micronesia-FSM

DEPENDENT STUDENT
Tracking Group
V1

Your 2017–2018 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 may ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information we will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the COM-FSM Financial Aid Office. If you have questions about verification, contact the nearest COM-FSM Financial Aid Office as soon as possible so that your financial aid will not be delayed.

A. Dependent Student's Information

Student's Last Name	Student's First Name	Student' M.I	Student's SS/ID Number
Student's Mailing Address (P.O Box City, State, Zip Code)			Student's Date of Birth
			Home Phone

B. Dependent Student's Family Information

Number of Household Members: List below the people in the parents' household. Include:

- Yourself and parent(s) (including a stepparent) even if you don't live with your parent(s).
- Your parent(s)' other children if the parent(s) will provide more than half of the children's support from July 1, 2017, through June 30, 2018, or if the other children would be required to provide parental information if they were completing a FAFSA for 2017–2018. Include children who meet either of these standards even if the children do not live with your parent(s).
- Other people if they now live with your parent(s) and the parent(s) provide more than half of the other people's support and will continue to provide more than half of their support through June 30, 2018.

Number in College: Please include in the space below information about any household member, excluding the parents, who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2017, and June 30, 2018, include the name of the college.

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

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>	<i>Central University</i>	<i>Yes</i>
		Self		

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.

Student Name: _____

SS/ID Number: _____

C. Dependent Student's Income Information to Be Verified

1. NON U.S TAX RETURN FILERS

____ I, the student, completed a 2015 foreign tax return or a tax return with another U.S territory or one of the Freely Associated States (FAS). A copy is attached. If you did not file a tax return, complete **Item #2** below.

If more space is needed, attach a separate page with the student's name and Social Security Number at the top.

Employer's Name	2015 Amount Earned	IRS W-2 Attached?
ABC Shipping (example)	\$1,280	Yes

Note: We may require you to provide documentation from the IRS that indicates a 2015 IRs income tax return was not filed with the IRS.

2. TAX RETURN NONFILERS (including non-working)

Complete this section if you did not file and is not required to file a 2015 income tax return with the IRS or any other government agency.

Check the box that applies:

I, the student, was not employed and had no income earned from work in 2015.

I, the student, was employed in 2015 and has listed below the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2/wage statement form is attached. Provide copies of all 2015 IRS W-2/wage statement forms issued to you by your employers. List every employer even if they did not issue an IRS W-2/statement form.

D. Parent's Income Information to Be Verified

1. NON U.S TAX RETURN FILERS

____ The student's, parent completed a 2015 foreign tax return or a tax return with another U.S territory or one of the Freely Associated States. A copy is attached. If the parent(s) did not file a tax return, complete **Item #2** below.

If more space is needed, attach a separate page with the student's name and Social Security Number at the top.

Employer's Name	2015 Amount Earned	IRS W-2 Attached?
Pro Auto	\$980	Yes
Parent 1:		
Parent 2:		

Note: We may require you to provide documentation from the IRS that indicates a 2015 IRs income tax return was not filed with the IRS.

2. TAX RETURN NONFILERS (including non-working)

Complete this section if the student's parent(s) will not file and is not required to file a 2015 income tax return with the IRS or other government agency.

Check the box that applies:

Neither parent was employed, and neither had income earned from work in 2015.

One or both parents were employed in 2015 and have listed below the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2/wage statement form is provided. Provide copies of all 2015 IRS W-2/wage statement forms issued to the parents by their employers. List every employer even if they did not issue an IRS W-2/wage statement form.

Student Name: _____

SS/ID Number: _____

E. Parent's Other Information to Be Verified

Complete this section if one or both of the student's parent(s) paid for child support in 2015.

1. SNAP Benefits, check the box:

One of the persons listed in the household received SNAP benefits in 2015.

Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2015.

2. Child Support Paid, check the box:

One (or both) of the student's parents included in the household and/or the student paid child support in 2015 for a child not included in the parent(s) household. Provide in the space below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names and ages of the children for whom child support was paid, and the total annual amount of child support that was paid in 2015 for each child.

If you need more space, attach a separate page that includes the student's 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	Age of Child for Whom Support Was	Amount of Child Support
Joe Jones	Jane Doe	Jake Jones	5	\$6,000

Note: If we have reason to believe that the information regarding child support paid is inaccurate, we may require additional documentation, such as:

- A signed statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks, money order receipts, or similar records of electronic payment having been made.

F. Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. **WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both. The student and one parent must sign and date.**

Student's Signature

Date

Parent's Signature

Date