

2019-2020 Verification Worksheet Federal Student Aid Programs College of Micronesia-FSM

DEPENDENT STUDENT Tracking Group

V5

Your 2019–2020 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called <u>verification</u>. 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	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, 2019, through June 30, 2020, or if the other children would be required to provide parental information if they were completing a FAFSA for 2019–2020. 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, 2020.

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, 2019, and June 30, 2020, 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)
Missy Jones (example)	18	Sister	Central University	Yes
		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 <u>Student's Income</u> Information to Be Verified				
1. NON U.S TAX RETURN FILERS				
I, the student, completed a 2017 foreign tax return or a tax return copy is attached. If you did not file a tax return, complete Item #2	The state of the s	ly Associated States (FAS). A		
If more space is needed, attach a separate page with the student's name	and Social Security Number at the top.			
Employer's Name	2017 Amount Earned	IRS W-2 Attached?		
ABC Shipping (example)	\$1,280	Yes		
Nate: We may require you to provide degumentation from the IDC that in	odicatos a 2017 IDs incomo tov roturo was not	filed with the IDC		
Note: We may require you to provide documentation from the IRS that in	idicates a 2017 lks income tax return was not	filed with the IKS.		
2. TAX RETURN NONFILERS (including non-working) Complete this section if you did not file and <u>is not required</u> to file a 2017	income tax return with the IRS or any other g	overnment agency.		
Check the box that applies:				
I, the student, was not employed and had no income earned from	work in 2017.			
I, the student, was employed in 2017 and has listed below the names of all employers, the amount earned from each employer in 2017, and whether an IRS W-2/wage statement form is attached. Provide copies of all 2017 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. <u>Parent's Income</u> Information to Be Verified				
1. NON U.S TAX RETURN FILERS				
The student's, parent completed a 2017 foreign tax return or a tax A copy is attached. If the parent(s) did not file a tax return, completed		he Freely Associated States.		
If more space is needed, attach a separate page with the student's name	and Social Security Number at the top.			
Employer's Name	2017 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 in	ndicates a 2017 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 <u>is not req</u> agency.	<u>uired</u> to file a 2017 income tax return with th	e IRS or other government		
Check the box that applies:				
Neither parent was employed, and neither had income earned from	om work in 2017.			
One or both parents were employed in 2017 and have listed below 2017, and whether an IRS W-2/wage statement form is provided parents by their employers. List every employer even if they did not be the control of the	d. Provide copies of all 2017 IRS W-2/wage s			

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 2017.						
1. SNAP	Benefits, check the box	:				
0	ne of the persons listed	in the household received SNAP be	enefits in 2017.			
	ve have reason to believ agency that issued the S	ve that the information regarding th SNAP benefits in 2017.	ne receipt of SNAP benefits is inacc	urate, we may require doc	umentation	
2. Child S	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 2017 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 2017 for each child.						
	of Person Who Paid	Name of Person to Whom	Name of Child for Whom	Age of Child for	Amount of	
Ivaine	Child Support	Child Support was Paid	Support	Whom Support Was	Child Support	
Joe Jone		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. High School Completion Status Provide one of the following documents that will indicate your high school completion status when beginning college in 2019-2020. 						
	Check the box of the document you will attach to this worksheet A copy of your high school diploma					
	A copy of your final official high school transcript that shows the date when your diploma was awarded					
	A state certificate or transcript received by you after passing a State-authorized examination (GED test, HSET, TASC, or other State-authorized examination) that the State recognizes as the equivalent of a 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.					
	An academic transcript that indicates your successful completion of at least a two-year program that is acceptable for full credit toward a bachelor's degree.					
	For a homeschooled student in a state where state law requires the student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its equivalent), a copy of that credential.					
	For a homeschool student from a state where state law does not require the student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its equivalent), a transcript or equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and included 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 nearest COM-FSM Financial Aid Office.

Student Name:		SS/ID Number:	
G. Identity and Statement of Educa Section G is <u>ONLY</u> to be completed	-	Financial Aid Office or front of a Nota	ıry
The student must appear in person at			
	(Name	of Postsecondary Education Institution)	
state-issued ID, or passport. COM-FSM date it was received and reviewed by I Statement of Education Purpose provid	Financial Aid Office will mainta Financial Aid. In addition, the led below. If you cannot appe	photo identification (ID), such as, but not ain a copy of the student's photo ID that is student must sign, in the presence of a Cear in person to sign this Statement of Ed Educational Purpose notarized by a public	annotated by the College with the COM-FSM Financial Aid official, the lucation Purpose, you will need to
	Statement of	f Education Purpose	
I certify that I Printed Student'		the individual signing this Statement of Edu	icational Purpose and that the
Federal student financial assistance I ma	ay receive will only be used for	educational purposes and to pay the cost	of attending
(Name of Postsecondary Education i	nstitution)		– for 2019-2020
Student's Signature	Date	Financial Aid Official's Signature	Date
	Notary's Cert	ificate of Knowledge	
State of	City/Country of		On
before me,(Notary Signature)	personally appeared,	(printed name of signer)	
and proved to me on basis of satisfactor	y evidence of identification	(Type of government-issued photo ID pro	vided)
To be the above named person who sign	ned the foregoing instrument.		
WITNESS my hand and official seal	(Notary Signature)	(Date Cor	mmission Expires)
	(So	eal)	
H. Certification and Signatures			
		eed on it is complete and correct. WARNING tenced to jail, or both. The student and or	
Student's Signature		Date	
Parent's Signature		 Date	

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