



Verification Form – V5

Your 2015-2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The Financial Aid Office will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent (if a dependent student) must complete and sign this form, attach any required documents, and submit the form and other required documents to the Financial Aid Office. Incomplete forms or forms without required documentation will not be accepted. Please complete sections A-I in black or blue ink. If any item does not apply, enter "N/A" for Not Applicable where a response is requested, or enter 0 in an area where an amount is requested.

A. Student's Information

El Camino College ID Number Last 4 Digits of Social Security Number Date of Birth (mm/dd/yyyy)
Last Name First Name Middle Name

B. Student's Family Information

Please check the box that indicates your current status. Write the names of all household members below. Attach a separate page if needed. Also write the name of the college for any household member, excluding your parent(s) who will be attending college at least half-time between July 1, 2015 and June 30, 2016, and will be enrolled in a degree, diploma, or certificate program.

Dependent Student*

Please include:

- Yourself and your legal parent(s) (biological, adoptive, or as determined by the state), even if you don't live with your parents. Grandparents, foster parents, legal guardians, widowed stepparents, aunts and uncles are not considered parents on this form unless they have legally adopted you. If your legal parents are married to each other, or are not married to each other and live together, answer the questions about both of them; and
Your parent(s)' other children, even if they don't live with your parent(s), if (a) your parents will provide more than half of their support from July 1, 2015 through June 30, 2016, or (b) the children would be required to provide parental information when applying for Federal Student Aid; and
Other people if they now live with your parents AND your parents provide more than half of their support AND will continue to provide more than half of their support from July 1, 2015 through June 30, 2016; and
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 certificate program at a postsecondary educational institution any time between July 1, 2015 and June 30, 2016. Attach a separate page if needed.

* A student is considered dependent if he/she was required to provide parental data on the FAFSA

Independent Student**

Please include:

- Yourself and your spouse, if married; and
Your children, if you will provide more than half of their support from July 1, 2015 through June 30, 2016, even if they do not live with you; and
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 from July 1, 2015 through June 30, 2016; and
Include the name of the college for any household member(s) enrolled at least half-time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2015 and June 30, 2016. Attach a separate page if needed.

**A student is considered independent if he/she was not required to provide parental data on the FAFSA

(continued next page)

Student's Name: _____

Last 4 digits of SSN: _____

Student's Family Information (continued)

| Full Name | Age | Relationship | College | Will be Enrolled at Least Half-Time |
|------------------------------|-----------|---------------|---------------------------|-------------------------------------|
| <i>Missy Jones (example)</i> | <i>18</i> | <i>Sister</i> | <i>Central University</i> | <i>Half-Time</i> |
| | | <i>Self</i> | | |
| | | | | |
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| | | | | |

C. Student's (and Spouse if Married) Income Information to Be Verified

Untaxed Income

I/we received untaxed income in 2014. (Sources may include Social Security benefits, TANF, CalWORKs, unemployment benefits, child support received, state disability, workers compensation, military housing allowance, VA Non-Educational benefits, general relief, alimony, or any other untaxed income received in 2014). I have indicated the source and the amount below.

| Student's Sources of Untaxed Income | 2014 Amount |
|-------------------------------------|-------------|
| | |
| | |
| | |

Filed a tax return

- I used the IRS Data Retrieval Tool on FAFSA on the Web to retrieve and successfully transfer my 2014 IRS income information into the FAFSA. Data has not changed and the Financial Aid Office will verify this. Skip to Section D.
- I am unable to use the IRS Data Retrieval Tool on FAFSA on the Web. **A 2014 IRS tax return transcript is attached.** Skip to Section D.

Did not file a tax return

- I/we was/were not employed and had no income earned from work in 2014.
- I/we was/were employed in 2014, but will not file and am/are not required to file a 2014 income tax return with the IRS. Listed below are the names of the employer and the amount earned. **Copies of W-2's are attached.**

| Employer's Name | 2014 Amount Earned |
|--|-----------------------------|
| <i>Suzy's Auto Body Shop (example)</i> | <i>\$2,000.00 (example)</i> |
| | |
| | |

D. Parent's Income Information to Be Verified for DEPENDENT STUDENTS - Note: If two parents were reported in Section B of this worksheet, the instructions and certifications below refer and apply to both parents.

Untaxed Income

My parents received untaxed income in 2014. (Sources may include Social Security benefits, TANF, CalWORKs, unemployment benefits, child support received, state disability, workers compensation, military housing allowance, VA Non-Educational benefits, general relief, alimony, or any other untaxed income received in 2014). I have indicated the source and the amount below.

| Parent's Sources of Untaxed Income | 2014 Amount |
|------------------------------------|-------------|
| | |
| | |
| | |

(continued next page)

Student's Name: _____ Last 4 digits of SSN: _____

Parent's Income Information to Be Verified for DEPENDENT STUDENTS (continued)

✓ **Filed a tax return**

- My parents used the IRS Data Retrieval Tool on FAFSA on the Web to retrieve and successfully transfer 2014 IRS income information into the FAFSA. Data has not changed and the Financial Aid Office will verify this. Skip to Section E.
- My parent(s) is/are unable to use the IRS Data Retrieval Tool on FAFSA on the Web. **A 2014 IRS tax return transcript is attached.** Skip to Section E.

✓ **Did not file a tax return**

- My parent(s) was/were not employed and had no income earned from work in 2014.
- My parent(s) was/were employed in 2014, but will not file and is/are not required to file a 2014 income tax return with the IRS. Listed below are the names of the employer and the amount earned. **Copies of W-2's are attached.**

| Employer's Name | 2014 Amount Earned |
|--|-----------------------------|
| <i>Suzy's Auto Body Shop (example)</i> | <i>\$2,000.00 (example)</i> |
| | |
| | |
| | |

E. SNAP Information to Be Verified

✓ **Check the box below if someone in the student's/parent'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.

F. Child Support Information to Be Verified

✓ **Check the box and complete the section below if child support was paid in 2014.**

- Your or your spouse, if independent, or one (or both) of your parents, if dependent, listed in Section B of this worksheet paid child support in 2014. I have indicated below the name of the person who paid the child support, the name of the person to whom the child support was paid, and the total annual amount of child support that was paid in 2014 for each child. If asked by the school, I will provide documentation of child support paid in 2014 for each child. If asked by the school, I will provide documentation of payment of child support. *If you need more space, attach a separate page that includes the student's name and last 4 digits of 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 | Amount of Child Support Paid in 2014 |
|---------------------------------------|---|---|--------------------------------------|
| <i>Marty Jones (example)</i> | <i>Chris Smith</i> | <i>Terry Jones</i> | <i>\$6,000.00</i> |
| | | | |
| | | | |
| | | | |

G. High School Completion Status

PLEASE REVIEW THE HIGH SCHOOL EQUIVALENCY AND EVALUATION SHEET.

✓ **Check the box below that applies to you and attach an official transcript to this form.**

- I graduated from a United States or foreign high school and received a diploma – Month and Year: _____/_____ Name of High School (Please do not abbreviate name) _____ State/Country _____
- I completed a home school curriculum: Month _____/Year _____ State: _____
- I received a General Educational Development (GED): Month _____/ Year _____
- I passed the California High School Proficiency Examination (CHSPE): Month _____/ Year _____
- I graduated from a United States or a foreign college, university, or post-secondary school with an AA, AS, BA, or BS. Name of College or University (Please do not abbreviate name) _____ Month _____/ Year _____

Student's Name: _____ Last 4 digits of SSN: _____

Complete sections H (Identity Verification) and I (Statement of Educational Purpose / Certification and Signatures).

H. Identity Verification

You must appear in person and present a valid government issued photo identification such as a driver's license, state issued identification, military identification, or passport.

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

The student must appear in person at _____ to
(Name of Postsecondary Educational Institution)

verify his or her identity by presenting a valid government issued photo identification, such as, but not limited to, a driver's license, other state-issued identification, or passport. The institution will maintain a copy of the student's photo identification that is annotated with the date it was received and the name of the official at the institution authorized to verify the student's identification.

In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

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 _____ for the 2015-2016 Award Year.
(Name of Postsecondary Educational Institution)

Student's Signature

Date

Student's Identification Number

Student's Name: _____ Last 4 digits of SSN: _____

✓ **Check the box below and complete the section if you are unable to appear in person.**

I am unable to appear in person. Attached is a copy of a valid government issued photo identification such as a driver's license, state issued identification, military identification, or passport and an original notarized statement of educational purpose.

Statement of Educational Purpose

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
_____ for the 2015-2016 Award Year.
(Name of Postsecondary Educational Institution)

Student's Signature

Date

Student's Identification Number

Notary's Certificate of Acknowledgement

State of _____
City/County of _____
On _____, before me, _____,
(Date) (Notary's Name)
personally appeared, _____, and provided 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)

I. Statement of Educational Purpose/Certification and Signatures

I/we certify that all of the information reported on this verification worksheet is complete and correct and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending El Camino College for the 2015-2016 Award Year. The student and one parent (if a dependent student) must sign and date below.

Student's Signature

Date

Parent's Signature

Date

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