2019-2020 VERIFICATION WORKSHEET

Federal Student Aid Programs

Your *2019–2020* 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 reported on your FAFSA. To verify that you provided correct information, Toccoa Falls Financial Aid Staff 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 must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the Toccoa Falls Financial Aid Office**. If you have any questions about verification, contact the Financial Aid Office as soon as possible in order to avoid a delay in receiving your financial aid award.

As reported on the *2019-2020 FAFSA* I am a (check one):

STEP 1 – STUDENT INFORMATION

☐ **Dependent Student** ☐ **Independent Student**

Last Name *First Name* *Social Security Number*

Permanent Address *Street & Number* *City/State/Zip* *Date of Birth*

Cell Phone Number (Include Area Code) *Home Phone Number (Include Area Code)* *Email Address*

STEP 2 – FAMILY INFORMATION

If you are a **DEPENDENT STUDENT**, include:

- Yourself
- Your parent(s) (including step-parents)
- Your parent(s) other dependent children if **a**) your parent(s) will provide more than half of their support from July 1, 2019 through June 30, 2020, or **b**) the children would be required to provide parental information when applying for Federal Student Aid
- Other people only if they now live in your parent household and your parents will provide more than half of their support from July 1, 2019 through June 30, 2020

If you are an **INDEPENDENT STUDENT**, include:

- Yourself
- Your spouse (if you are married)
- Your children if you will provide more than half of their support from July 1, 2019 through June 30, 20120
- Other people only if they live in your household and you provide more than half of their support and will continue to do so from July 1, 2019 through June 30, 2020

Full Name	Age	Relationship	College Attending in 2019-20
		Self	Toccoa Falls College

*If you need more space, attach a separate page.

STEP 3 – Food Stamps/Supplemental Nutrition Assistance Program (SNAP) – CALENDAR YEAR 2017

(This includes Food Stamps, Free/Reduced Price Lunch Benefits, TANF Benefits, or WIC Benefits.)

Did the student, spouse, or anyone in the household receive Food Stamps/SNAP benefits during the calendar year 2017?

_____**YES,** I received Food Stamps/SNAP benefits during 2016. _____**NO,** I did not receive benefits.

STEP 4 – CHILD SUPPPORT PAID – CALENDAR YEAR 2017

Did you **or your parent(s)** pay child support because of divorce or separation during the calendar year 2017? (Do not include support for children included in household size in STEP 2) _____**YES**…Complete the table below. _____**NO**…Continue to STEP 5

Amount of Child Support Paid	Child support paid to whom	Child for whom support was paid
TOTAL		

*If you need more space, attach a separate page.

NOTE: ***WE CANNOT ACCEPT A SIGNED COPY OF THE TAX RETURN****. If the student and/or parent did not use the IRS Data Retrieval Tool when completing the FAFSA, the student and/or parent* ***must submit an IRS Tax Transcript, OR go back into the FAFSA and use the IRS Data Retrieval Tool*** *to complete the FAFSA 2017 tax information. To request a Tax Return Transcript, please visit http://www.irs.gov/Individuals/Get-Transcript or call the* ***IRS at 1(800) 829-1040****.*

Tax Filing Extensions: *If the student and/or parent is required to file income taxes for 2017, but obtained an extension, the student and/or parent must submit an IRS form 4868 or IRS approval to extend beyond October 15, 2018 and a W-2 for each source of employment. If self-employed, a signed statement must be submitted certifying the amount of the AGI (adjusted gross income) and U.S. income tax paid for 2017. When taxes are filed, an IRS Tax Transcript must be requested from the IRS and sent to the school to re-verify the AGI and taxes paid.*

STEP 5 – *STUDENT* TAX TRANSCRIPT & INCOME INFORMATION – CALENDAR YEAR 2017

Are you or will you be required to file a 2017 Federal Income Tax Return?

____YES…Did you transfer your tax information using the FAFSA IRS Data Retrieval Tool? **____Yes** (go to STEP 6) . **____No** …if **No**, you must attach a copy of a Federal Tax Return Transcript from the IRS as directed above (not a copy of Federal Tax Return 1040 form filed), then go to STEP 6.

____NO…Complete the table below and attach copies of ALL 2017 W-2 forms and any other forms of taxed or untaxed income, including housing allowance, workers' compensation, child support, disability, etc. Attach a Student Low Income Statement if you are an independent student.

Source of Income (include all taxed and untaxed income and money received) (Fill out only if you did NOT file taxes)	Amount Earned/Received in 2017
TOTAL	

STEP 6 –*PARENT(S)*/SPOUSE TAX TRANSCRIPTS & INCOME INFORMATION –CALENDAR YEAR 2017

Are you or will you be required to file a 2017 Federal Income Tax Return?

___YES Did your parents or spouse transfer their tax information using the FAFSA IRS Data Retrieval Tool? **____Yes** (go to STEP 7) . **____No** …if **No**, you must attach a copy of a Federal Tax Return Transcript from the IRS as directed above (not a copy of Federal Tax Return 1040 form filed), then go to STEP 7.

____NO Complete the table below and attach copies of ALL 2017 W-2 forms and any other form of taxed or untaxed income, including housing allowance, workers' compensation, child support, disability, etc. Attach a Student Low Income Statement (if for spouse) or Parent Low Income Statement (if for parent).

Source of Income (include all taxed and untaxed income and money received) (Fill out only if you did NOT file taxes)	Amount Earned/Received in 2017
TOTAL	

STEP 7 – CERTIFICATION: By signing this worksheet, I certify all the information reported is complete and correct:

Student Signature *Date* *Student Name (Please Print)*

Parent Signature (IF student is dependent) OR Spouse Signature (IF Student is married) *Date* *Parent/Spouse Name (Please Print)*

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

Do NOT mail this worksheet to the U.S. Department of Education. Submit this worksheet to:

Office of Student Financial Services
107 Kincaid Dr. MSC 900
Toccoa Falls, GA 30598
finaid@tfc.edu • 706-886-7299 Ext. 5435; 706-282-6041 Fax