

# 2020–2021 Verification Worksheet – DEPENDENT V5

Blue Mountain College, Office of Financial Aid, P O Box 160, Blue Mountain, MS 38610

Your 2020–2021 Free Application for Federal Student Aid (FAFSA) has been selected for a review in a process called “Verification.” In this process, the Office of Financial Aid (OFA) must compare information from your FAFSA with information from the IRS and/or other financial documents. Section 483 of the Higher Education Act of 1965, as amended, gives us the authority to ask for this information before awarding federal aid. The OFA will compare the submitted documents to your FAFSA information. If there are any discrepancies, the OFA may request further clarification. If corrections are needed, the OFA will make them on your behalf. The OFA can help you if you have questions about completing this documentation. **All verification documents for the 2020-2021 academic year must be submitted by May 1, 2021. Verification file review may take up to four weeks.**

**No federal financial aid will be awarded to you until the verification process is complete.**

It is important that you respond promptly to this request. We cannot award you federal financial aid until your file is complete. Some aid programs are limited in funding and may not be available to you if the completion of your file is delayed.

## **Student’s Information:**

\_\_\_\_\_  
Student’s Last Name/First/M.I.

\_\_\_\_\_  
Student’s Social Security Number

\_\_\_\_\_  
Student’s Street Address (include apt. no.)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Student’s Date of Birth

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number (include area code)

## **What You Need To Do:**

- Complete and sign this worksheet (REQUIRED even if IRS Data Retrieval Tool on FAFSA is used).
- Submit the completed worksheet, and any other documents requested, to the Financial Aid Office.
- Once you submit your verification documents please do not make any corrections to your FAFSA unless instructed to do so by the Office of Financial Aid.
- Please contact the Financial Aid Office if you have questions about the verification process. (Contact information is included on the accompanying letter).

Student's Name: \_\_\_\_\_

### Family Information

1. List yourself below:

<i>Full Name</i>	<i>Age</i>	<i>College Name</i>	<i>Will be Enrolled at Least half-time</i>
		BMC	

2. List your parent(s) (including a step-parent) in the household even if the student doesn't live with the parents.

<i>Full Name</i>	<i>Age</i>	<i>Relationship</i>

3. List parents' other children if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2021, or if the other children would be required to provide parental information if they were completing a FAFSA for 2020-2021. List other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2021. Do not include foster children.

<i>Full Name</i>	<i>Age</i>	<i>Relationship</i>	<i>College, if applicable</i>	<i>Will be Enrolled at Least half-time</i>

If more space is needed, attach a separate page with the student's name and Social Security Number at the top. Additional documentation may be requested if we have reason to believe that the information is inaccurate.

Number in college: Include in the space above information about any household member who is, or will be, enrolled at least half-time in a degree, diploma, or certificate program at an eligible postsecondary educational institution anytime between July 1, 2020, and June 30, 2021, and include the name of the college.

Student's Name: \_\_\_\_\_

**PARENT(S) - Income Tax Information and Supporting Documents** (Choose 1 option)

\_\_\_\_\_ **Parent(s) DID or WILL file a 2018 Tax Return? (Non-tax filers, skip to questions below)**

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Yes – Parent Used IRS Data Retrieval tool (DRT) on FAFSA | <input type="checkbox"/> Yes - Parent will be making corrections to the FAFSA to use the IRS DRT | <input type="checkbox"/> Yes - Parent has attached a copy of their IRS Tax Return Transcript Summary | <input type="checkbox"/> No – Parent has requested an extension to file with the IRS |
|---|--|--|--|

\_\_\_\_\_ **Parent(s) WILL NOT file, and are NOT required to file, a 2018 federal income tax return but did work in 2018. Please list employer's name, amount earned and attach W-2s and/or 1099s for income earned in 2018.\*\***

**\*\*PARENT MUST PROVIDE A NON-FILING CONFIRMATION FROM THE IRS.**

	Employer's Name	2018 Amount Earned	IRS W-2 Provided?
Father/Stepfather-			
Mother/Stepmother-			

\_\_\_\_\_ **I (we) did NOT earn any income in 2018 and did NOT file, and am NOT required to file, a 2018 federal income tax return. \*\***

**\*\* PARENT MUST PROVIDE A NON-FILING CONFIRMATION FROM THE IRS.**

**STUDENT - Income Tax Information and Supporting Documents** (Choose 1 option)

\_\_\_\_\_ **Student DID or WILL file a 2018 Tax Return? (Non-tax filers, skip to questions below)**

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Yes – Student Used IRS Data Retrieval tool (DRT) on FAFSA | <input type="checkbox"/> Yes - Student will be making corrections to the FAFSA to use the IRS DRT | <input type="checkbox"/> Yes - Student has attached a copy of their IRS Tax Return Transcript Summary | <input type="checkbox"/> No – Student has requested an extension to file with the IRS |
|--|---|---|---|

\_\_\_\_\_ **Student WILL NOT file, and is NOT required to file, a 2018 federal income tax return but did work in 2018. (Please list employer's name, amount earned and attach W-2s and/or 1099s for income earned in 2018).**

Student	Employer's Name	2018 Amount Earned	IRS W-2 Provided?

\_\_\_\_\_ **Student did NOT earn any income in 2018 and did NOT file, and is NOT required to file, a 2018 federal income tax return.\*\***

Student's Name: \_\_\_\_\_

Additional Financial Information and Untaxed Income (ENTER ZEROES IF NO FUNDS WERE RECEIVED)		
	STUDENT	PARENT
Education credits – from IRS Form 1040 – Schedule 3 – line 50.	\$	\$
Child Support Paid because of divorce or separation or as a result of a legal requirement. <b>Don't include</b> support for children in your household.	\$	\$
Taxable earnings from need-based employment programs such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$	\$
Taxable college grant and scholarship aid <b>reported to the IRS in the adjusted gross income</b> . Includes AmeriCorps benefits, (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$	\$
Combat pay or special combat pay. Only enter the amount that was taxable and included in the adjusted gross income. <b>Do not enter</b> untaxed combat pay.	\$	\$
Earnings from work under a Cooperative Education program offered by a college.	\$	\$
Payments to tax-deferred pension and retirement savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S.	\$	\$
IRA deductions and payments from IRS Form 1040-Schedule 1-line 28 plus line 32.	\$	\$
Child support you received for all children. Do not include foster care or adoption payments.	\$	\$
Tax exempt interest income from IRS Form 1040-line 2a.	\$	\$
Untaxed portions of IRA distributions and pensions from IRS Form 1040-line 4a minus line 4b. Exclude rollovers. If negative, enter a zero.	\$	\$
Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don't include the value of on-base military housing or the value of a basic military allowance for housing.	\$	\$
Veterans' non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$	\$
Other untaxed income not reported (such as worker's compensation, disability, etc. Also include untaxed portions of health savings accounts from IRS Form 1040 - Schedule 1 - line 25. <b>DO NOT INCLUDE:</b> extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Innovation and Opportunity Act educational benefits, on-base military housing or military housing allowance, combat pay, benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.)	\$	\$
Money <b>received</b> , or paid on your behalf (e.g., bills), not reported elsewhere on this form. This includes money that you received from a parent or other person whose information is not reported on your FAFSA and that is not part of a legal child support agreement.	\$	XXXXXXX

**Certification and Signatures**

By signing I certify that all of the information reported is complete and correct to the best of my knowledge. I also understand if I purposefully give false or misleading information on this worksheet, I would be violating federal statute, and could face penalty. In addition, I understand that documents may be copied if the student has a sibling or parent who attends BMC.

\_\_\_\_\_  
STUDENT SIGNATURE (REQUIRED)

\_\_\_\_\_  
Date

\_\_\_\_\_  
PARENT SIGNATURE (REQUIRED)

\_\_\_\_\_  
Date