

2020–2021 Verification Worksheet – INDEPENDENT – V1

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 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).

Family Information

1. List yourself, spouse, child(ren) if the student or spouse provides more than half or the child(ren)'s support from July 1, 2020, through June 30, 2021, even if a child does not live with student.

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

2. List other people if they now live with you and you or your spouse provides 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.

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

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

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

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

_____ **Student/Spouse 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 MUST PROVIDE A NON-FILING CONFIRMATION FROM THE IRS.**

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

_____ **Student/spouse did NOT earn any income in 2018 and did NOT file, and are NOT required to file, a 2018 federal income tax return.**

- | | |
|----------------------------------|---------------------------------|
| <input type="checkbox"/> Student | <input type="checkbox"/> Spouse |
|----------------------------------|---------------------------------|

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

Student's Name: _____

Additional Financial Information and Untaxed Income (ENTER ZEROES IF NO FUNDS WERE RECEIVED)		
	STUDENT	SPOUSE
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. Don't include 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 reported to the IRS in the adjusted gross income . 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. Do not enter 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. DO NOT INCLUDE: 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 received , 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.	\$	\$

Certification and Signatures

By signing this worksheet, I certify that all of the information reported on this worksheet 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 (including the Verification Worksheet) may be copied if the student has a sibling or parent who attends BMC.

STUDENT SIGNATURE (REQUIRED)

DATE

SPOUSE SIGNATURE (OPTIONAL)

DATE