2019-2020 Dependent Institutional Verification Worksheet (V6)

Financial Aid Office
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Students selected for institutional verification must also complete the Standard Verification (V1) Worksheet and **MUST provide copies of all Student and Parent(s) 2017 W-2 forms** in order for the verification process to be complete. If you do not have or are unable to receive a copy of your W-2 forms from your employer(s), please request an IRS Wage and Income Transcript at www.irs.gov/individuals/get-transcript. If you were self-employed and do not have W-2s, please submit a statement confirming that you were self-employed; include your name(s), the type/name of your business, and your net income. The individual whose income is being verified will need to sign (handwritten signature) and date the statement. PLEASE NOTE: you may be required to file a tax return even if you had low net earnings. Please refer to the IRS Tax Guide (Page 6, Chapter 1) for self-employment filing criteria.

STUDENT INFORMATION

Last Name _____ First Name _____ M.I. _____ EWC Student ID Number _____

UNTAXED INCOME INFORMATION

Fill in the information below as it applies to the student AND the student's parent(s) whose information is on the FAFSA. **DO NOT LEAVE ANY ITEM BLANK.** 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. **ALL AMOUNTS ARE ANNUAL.** To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2017, multiply that amount by the number of months in 2017 you paid or received it. If you did not pay or receive the same amount each month in 2017, add together the amounts you paid or received each month. If more space is needed for any item, attach a separate page with the student's name, student ID #, and appropriate information.

A. Payments to tax-deferred pension and retirement savings

List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans, including, but not limited to, amounts reported on W-2 forms (Boxes 12a through 12d with codes D, E, F, G, H, and S). **Copies of all W-2 forms must be attached.**

Name of person who made payment	Total amount paid in 2017
	$
	$

B. Child support received

List the amount of any child support RECEIVED in 2017 for any children listed on the Standard Verification (V1) worksheet as a household member.

Name of adult who received the child support payment	Name of child for whom child support was received	Age of child	Total annual amount of child support received in 2017
			$
			$
			$

C. Housing, food, and other living allowances (these are often paid to members of the military, clergy, and others)

Total cash value that the student's parents received in 2017. If the student's parents received free room and board in 2017 for a job that was not awarded to them as student financial aid, its value must be included in this figure. **DO NOT include** rent subsidies for low-income housing, the value of on-base military housing or the value of a basic military allowance for housing.

Name of recipient	Type of benefit received	Total amount of benefit received in 2017
		$
		$

D. Veterans non-education benefits

List the total amount of veterans non-education benefits received in 2017. **Include** Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances. **DO NOT include** federal veterans educational benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, Post-9/11 GI Bill.

Name of recipient	Type of Veterans non-education benefit received	Total amount of benefit received in 2017
		$
		$

E. Other untaxed income

List the amount of other untaxed income not reported and not excluded elsewhere on this form. **Include** items such as disability, SSD/SSDI, workers' compensation, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc. **DO NOT include** student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Name of recipient	Type of other untaxed income received	Total amount of other untaxed income received in 2017
		$
		$

F. Money received or paid on the student's behalf

List any money received or paid on the student's behalf (e.g., payment of a bill) not reported elsewhere on this form. **Include** support from a parent whose information was NOT on the student's FAFSA, but **DO NOT include** information from a parent whose information IS included on the FAFSA. Amounts paid on the student's behalf also include any distributions to the student from a 529 plan owned by someone other than the student or student's parents, such as grandparent, aunts and uncles of the student.

Purpose (e.g., cash, rent, books, cell phone bill, car insurance, etc.)	Source of payment (parent NOT on FAFSA, grandparent, etc.)	Total amount received in 2017
		$
		$

G. Additional information

So that we may fully understand the student's family's financial situation, please provide the below information about any other resources, benefits, and other amounts received by the student and any members of the student's household. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office, and include such things as federal veterans education benefits, military housing, low-income housing, SNAP, Medicaid, TANF, WIC, Supplemental Security Income, etc.

Name of recipient	Type of Benefit (e.g., veterans, military, low-income, Medicaid, WIC, SSI, etc.)	Total amount received in 2017 (if known)
		$
		$
		$

STATEMENT OF SUPPORT

Please explain IN DETAIL how your family supported itself in 2017. Please include whether or not you lived with someone else who helped support you/your family, or received assistance not otherwise listed on this form. Because FAFSA information requires 2017 income information which may not reflect your current situation, please also explain IN DETAIL how your family is supporting itself ***now***, including any changes in employment, benefits, or other income since 2017. You may attach a separate sheet if needed.

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CERTIFICATIONS AND SIGNATURES

By signing this worksheet, we certify that all of the information reported is complete and correct. We also acknowledge that we have read and agree to comply with all verification policies as stated by EWC in the College Catalog and on the EWC website. **Failure to submit information in a timely fashion may result in the application being filed as inactive** with no further consideration and no federal aid for the academic year. Student and parent must sign:

_____ _____

Student's signature *Date* *Parent's signature* *Date*

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