A. Student Information

Financial Aid Office

I-V5

2015-2016 Verification Worksheet

Independent Student V-5

The U.S. Department of Education and/or Southwestern College (SWC) selected your application for review in a process called "Verification." In this process, we are required by law to compare information from your FAFSA with the information provided on this form and all requested financial documentation. Corrections may be deemed necessary. We cannot process your financial aid until verification has been completed, so please provide the required documents as soon as possible.

Last Name	First Name	MI	MI SWC ID Number		Date of Birth	
B. Family Information						
List below the people in your I	nousehold. Include:					
Yourself and, if married,	your spouse,					
• Your children, if you will	provide more than half of their	support from Ju	ly 1, 2015 through	June 30,	2016, or	
Other people who live w	ith you and will receive more th	nan half of their	support from you t	from July	1, 2015 through June 30, 2016.	
List the names of all household me	mbers below and whether the househol	d member is attendir	ng college at least 1/2 ti	me. Attach a	a separate sheet if you need additional space.	
Full Name	Age	Re	Relationship		ttending College in 2015-2016	
			Myself		Southwestern College	
C. Independent Student's	and Spouse's Income Inform	ation				
Check only <u>ONE</u> box:						
The student/spous student's FAFSA.	e has used the IRS Data Retric	eval Tool in FAF	SA to transfer 20	14 IRS in	come tax return information into the	
The student's/spou the top of page 2.	se's 2014 IRS Tax Return Transcr	ipt (NOT the inc	ome tax return) is a	attached t	to this worksheet. For instructions, see	
The student/spouse	had no income, will not file anc	d was not require	ed to file a 2014 inc	ome tax r	return.	
the student's/spous		ed from each em	•		me tax return. List the names of all of ne IRS W-2 forms. Please include every	
Student or Spouse	Student or Spouse Employer's Name		Amount earned in 2014		IRS W-2/1099G (Unemployment) Attached?	
	Suzy's Auto Body Shop (exar	nple)	\$2000.00 (example	e)	Yes (example)	

BAS (Basic Allowance for Subsistence-If not applicable, check here. To be completed ONLY if you or your spouse were in the military during 2014. Student:		online, click	an IRS Tax Return Transcri Get Transcript ONLINE" (Granscript."	-				-
Spouse: Enlisted (\$357.55) Months in 2014 Officer (\$246.24) Months in 2014 D. Child Support Paid (If not applicable, check here) Complete this section if one of the student's parents paid child support, the name of the person to whom the child support was paid, the names and ages of the children for whom child support was paid and the total ANNUAL amount of child support paid in 2014 for EACH child. If asked by the school, you will be required to provide documentation of the payment of child support. If you need more space, attach a separate page that includes the student's name and SWC ID number at the top. Name of Person Who Paid Name of Person to Whom Child Support was Paid Chil	BAS (Basic Allow	vance for Su	bsistence-If not applicable,	check here.	□) : To be complete	ed ONLY if you or your spo	ouse were in the milita	ıry
D. Child Support Paid (If not applicable, check here	during 2014.	Student:	Enlisted (\$357.55)	Montl	ns in 2014 C	Officer (\$246.24)	_ Months in 2014	
Complete this section if one of the student's parents paid child support in 2014. Indicate below the name of the person who paid the child support, the name of the person to whom the child support was paid, the names and ages of the children for whom child support was paid and the total ANNUAL amount of child support paid in 2014 for EACH child. If asked by the school, you will be required to provide documentation of the payment of child support. If you need more space, attach a separate page that includes the student's name and SWC ID number at the top. Name of Person Who Paid Name of Person to Whom Child Support was Paid Child Gruphom Child Support was Paid Child Support was Paid Child Support was Paid in 2014 Morty Jones (example) Chris Smith Terry Jones 13 \$6000.00 E. Receipt of SNAP Benefits (If not applicable, check here. Chris Smith Child Support was Paid		Spouse:	Enlisted (\$357.55)	Montl	ns in 2014 C	Officer (\$246.24)	_ Months in 2014	
Indicate below the name of the person who paid the child support, the name of the person to whom the child support was paid, the names and ages of the children for whom child support was paid and the total ANNUAL amount of child support paid in 2014 for EACH child. If asked by the school, you will be required to provide documentation of the payment of child support. If you need more space, attach a separate page that includes the student's name and SWC ID number at the top. Name of Person Who Paid Child Support Was Paid Child Support Was Paid Child Support Was Paid Marty Jones (example) Chris Smith Terry Jones 13 S6000.00 E. Receipt of SNAP Benefits (If not applicable, check here. Chris Smith Terry Jones 13 S6000.00 E. Receipt of SNAP Benefits (If not applicable, check here. Chris Smith Student SNAP, formerly known as food stamps) any time during 2013 or 2014. Note: If we have reason to believe that the information regarding the receipt of SNAP benefits in Suncementation from the agency that issued the SNAP benefits in 2013 or 2014. Student SNAP Depose SNAP Depose SNAP benefits in Section Breceived depose to pay the cost of attending Southwestern Community College for 2015-2016. Student's Signature (Grind student must sign in the presence of a Financial Aid Administrator) G. Government Issued Photo ID - TO BE COMPLETED BY SWC FINANCIAL AID ADMINISTRATOR	D. Child Suppo	rt Paid (If r	not applicable, check her	e. □)				
Child Support	Indicate below the ages of the child school, you will	ne name of ren for who be required	the person who paid the chi m child support was paid an to provide documentation	ld support, t d the total A of the paym	the name of the pe	child support paid in 201	4 for EACH child. If asl	ked by the
E. Receipt of SNAP Benefits (If not applicable, check here. Check the appropriate box if you or anyone in your household listed in Section B received benefits from the Supplemental Nutrition Assistance Program (SNAP, formerly known as food stamps) any time during 2013 or 2014. Student SNAP Spouse SNAP Spouse SNAP Spouse SNAP Spouse SNAP Statement of Educational Purpose F. Statement of Educational Purpose I certify that I, (print student's name), am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending Southwestern Community College for 2015-2016. Student's Signature (Student must sign in the presence of a Financial Aid Administrator) G. Government Issued Photo ID - TO BE COMPLETED BY SWC FINANCIAL AID ADMINISTRATOR						_		
Check the appropriate box if you or anyone in your household listed in Section B received benefits from the Supplemental Nutrition Assistance Program (SNAP, formerly known as food stamps) any time during 2013 or 2014. Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2013 or 2014. F. Statement of Educational Purpose Certify that I, (print student's name), am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending Southwestern Community College for 2015-2016. Student's Signature	•	•)
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Student SNAP Spouse SNAP Spouse SNAP Information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2013 or 2014. F. Statement of Educational Purpose I certify that I, (print student's name), am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending Southwestern Community College for 2015-2016. Student's Signature Date (Student must sign in the presence of a Financial Aid Administrator) G. Government Issued Photo ID - TO BE COMPLETED BY SWC FINANCIAL AID ADMINISTRATOR								Assistance
I certify that I, (print student's name), am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending Southwestern Community College for 2015-2016. Student's Signature Date [Student must sign in the presence of a Financial Aid Administrator] G. Government Issued Photo ID - TO BE COMPLETED BY SWC FINANCIAL AID ADMINISTRATOR	Student SNAP □ Spouse SNAP □				information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2013 or			
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Student's Signature Date (Student must sign in the presence of a Financial Aid Administrator) G. Government Issued Photo ID - TO BE COMPLETED BY SWC FINANCIAL AID ADMINISTRATOR	that the federal	student fina	ncial assistance I may receive					
G. Government Issued Photo ID - TO BE COMPLETED BY SWC FINANCIAL AID ADMINISTRATOR						Date		
		(St	udent must sign in the presence of (a Financial Aid A	Administrator)			
Check one box:	G. Governmen	nt Issued Pl	noto ID - TO BE COMPLET	ED BY SWO	FINANCIAL AID	ADMINISTRATOR		
	Check one box:							
☐ Driver's License ☐ Passport ☐ Alien Registration Card ☐ Military Card ☐ CA or State ID		□ Drive	's License ☐ Passport	☐ Alien Registration Car		d Military Card CA or State		
Student ID Number: Received by:		C+··	dent ID Number	I	Pacaivad by]
Date: FA Administrator's Signature:		Student ID Number:			·			

Last Name _____ SWC ID Number ___

Last Name	
SWC ID Number_	

H. High School Completion Status

Provide one of the following documents that indicate the student's high school completion status when the student will begin college in 2015-2016:

- A copy of the student's final official high school transcript that shows the date when the diploma was awarded.
- A copy of the student's General Educational Development (GED) certificate, GED transcript or HiSet.
- An academic transcript that indicates the student successfully completed at least a two year program that is acceptable for full
 credit toward a Bachelor's Degree.
- If State law requires a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential. If State law does not require a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a transcript or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and documents the successful completion of a secondary school education in a homeschool setting.

$\ \square$ If you are unable to obtain any of the documentation listed above, please check the box that you understa	nd
that you are not eligible to receive Financial Aid.	

Students who do not have a High School Diploma or a recognized equivalent (e.g., GED), and who first enroll in a program of study on or after July 1, 2012 WILL NOT be eligible to receive Title IV student aid. Students could qualify for Title IV student aid under one of the Ability to Benefit (ATB) alternatives if the student completed those ATB alternatives and was enrolled in a Title IV eligible program prior to July 1, 2012. Those alternatives include the student passing an independently administered, approved ATB test or successfully completing at least six units of transferable work prior to that date. Student foreign high school diplomas may be referred to an outside agency for evaluation purposes.

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	Check box if your High School Diploma is on file	
		:

I. Certification

Signing this form certifies that the information reported is complete and correct and that any false statement or failure to provide proof when asked may be cause for delay, denial, reduction or withdrawal of financial aid. Warning: purposely giving false and/or misleading information may be cause for a fine, sentence to jail or both.

Student Signature Date Spouse Signature Date

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the Southwestern College Financial Aid Office. You should make a copy of this worksheet for your records.