

Dependent Verification Worksheet

2009-2010

Student's Last Name:	
Student's First Name:	M.I.
Last 4 Digits of SSN:	Date of Birth:
Mailing address	
E-mail:	Phone:

Return To:

College of the Siskiyous
 FINANCIAL AID OFFICE
 800 College Ave.
 Weed, CA 90694
 Phone: 530-938-5209
 Fax: 530-938-5501
 E-mail: finaid@siskiyous.edu
 Web site: www.siskiyous.edu/financialaid

Your financial aid application was selected for a process called "Verification." In this process, your 2009/10 FAFSA information will be compared to this worksheet and signed copies of your and your parent(s)' 2008 Federal tax form. Upon completing this review, we will send corrections, as needed, to the Office of Federal Student Aid and update your estimated financial aid offer.

What you should do:

1. Collect your and your parent(s)' signed Federal tax forms (including schedules, if applicable), W-2 forms, etc.
2. Complete and sign this worksheet – you and at least one parent.
3. Submit the completed worksheet, tax forms, and any other documents we requested. You may mail, fax, or hand-deliver this information to our office. See contact information above.

Family Information

List the people in your parent(s)' household, include:

- ❖ Yourself and your parent(s) (including stepparent) even if you don't live with your parents;
- ❖ Your parents' other children, even if they don't live with your parent(s), if (a) your parents will provide more than half of their support from July 1, 2009 through June 20, 2010, or (b) the children would be required to provide parental information when applying for federal student aid; and
- ❖ Other people if they now live with your parents and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

Write the names of all household members in the space(s) below. Also write in the name of the college for any household member, excluding your parent(s), who will be attending at least half time between July 1, 2009 and June 30, 2010, and will be enrolled in a degree, diploma, or certificate program. **If you need more space, attach a separate page.**

Full Name	Age	Relationship	College
<i>Martha Jones (example)</i>	24	<i>Sister</i>	<i>City University</i>
		<i>Self</i>	

Income Information

Tax returns include the 2008 IRS Form 1040 (including schedules, as applicable), 1040A, 1040EZ, a tax return from Puerto Rico or a foreign tax return. If you did not keep a copy of your tax return, request a copy from your tax preparer or request an official IRS form called a **Tax Account Transcript**. Free transcripts may be obtained by calling 1-800-829-1040.

Please check and complete the appropriate information below.

Student: () Check here if you are attaching a **signed** copy of your tax return.

() Check here if you will not file and are not required to file a U.S. Income Tax return.

If did not file, indicate your total wages for 2008:\$_____ If any answers are zero, please enter "0."

Parent: () Check here if you are attaching a **signed** copy(ies) of your parents' tax return(s).

() Check here if your parent(s)/stepparent will not file and are not required to file a U.S. Income tax return.

**If did not file, indicate parent total wages for 2008:\$_____ Parent \$_____ Parent or Stepparent
 If any answers are zero, please enter "0."**

OTHER INCOME FOR CALENDAR YEAR 2008

All amounts reported should reflect actual amounts received and/or paid between January 1, 2008 and December 31, 2008.
If the answer is zero or the question does not apply, enter 0. Report whole dollar amounts with no cents.

Additional Financial Information

Student		Parent
\$	Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040-line 50 or 1040A-line 31.	\$
\$	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, as reported in question 75.	\$
\$	Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$
\$	Student grant and scholarship aid reported to the IRS in your 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 your adjusted gross income. Combat pay is reported on the W-2 in Box 12, Code Q.	\$

Untaxed Income for 2008

Student		Parent
\$	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H and S.	\$
\$	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040- line 28 + line 32 or 1040A- line 17.	\$
\$	Child support received for all children. Don't include foster or adoption payments.	\$
\$	Tax exempt interest income from IRS Form 1040- line 8b or 1040A- line 8b.	\$
\$	Untaxed portions of IRA distributions from IRS Form 1040- lines (15a minus 15b) or 1040A- lines (11a minus 11b). Exclude rollovers. If negative, enter a zero here.	\$
\$	Untaxed portions of pensions from IRS Form 1040- lines (16a minus 16b) or 1040A-lines (12a minus 12b). Exclude rollovers. If negative, enter a zero here.	\$
\$	Housing, food and other living allowances paid to members of the military, clergy and other (including cash payments and cash value of benefits).	\$
\$	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 workers' compensation, disability, etc. Don't include student aid, earned income credit, child tax credit, welfare payments, untaxed Social Security benefits, Workforce investment Act educational benefits, combat pay (if you or your parent(s) are not tax filers), benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$

Signatures

By signing this worksheet, we certify that all the information reported is complete and correct. At least one parent must sign.

Student Signature

Date

Last Four Digits of SSN

Parent Signature

Date