

## 2019-2020 VERIFICATION WORKSHEET-V1 Dependent Student

INSTRUCTIONS: You were selected for verification; therefore, complete sections below.

PLEASE READ: Your 2019-2020 Free Application for Federal Student Aid (FAFSA) was selected for verification by the Department of Education. Before awarding any Federal Student Aid, we may ask you to confirm and/or document any of the information you reported on your FAFSA. To verify that you provided correct information the Office of Financial Aid & Scholarships will compare your FAFSA-ISIR with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. We may ask for additional information. If you have questions or need clarification about verification, contact your financial aid administrator as soon as possible to avoid any further delay on processing.

SECTION 1: STUDENT INFORMATION

nst Name	First Name .		Student's ID	
none Number			Date of Birth	
SECTION 2: FAMILY INFO	RMATION	7 III J II		
<b>3.</b> Your siblings (or st	pparent, if remar	whom they will provide more that ried or biological parents if living the the age 24 as of January 01, 20 arents, etc.) go to <b>Section 2.B.</b>	g together) even if you don't l	
Name	Age	Relationship	College	Enrolled at least ½ time
Missy Jones (example)	18	Sister	Central University	¥ Yes □ No
	1/1	Self	Diné College	☐ Yes ☐ No
			-11	$\square$ Yes $\square$ No
		Jan de la constitución de la con	4 //	☐ Yes ☐ No
		100	MAN	☐ Yes ☐ No
	X	1	1	□ Yes □ No
		11- 11		□ Yes □ No
1. Lives with your par	ents, and will co	Including children age 24 or over ontinue from July 01, 2019 througn 50% of financial support	th June 30, 2020 and,	
Name	Age	Relationship	College	Enrolled at least ½ time
				$\square$ Yes $\square$ No
				$\square$ Yes $\square$ No
oes your parents provide more than 50		eary support for this person? $\square$ I	Ves	☐ Yes ☐ No

If yes, explain: \_

Student's Name:	Student's ID#:
SECTION 3: INCOME VERIFICATION	
A. STUDENT TAX RETURN FILER/NONFILER student tax information.)	(Student completes this sections, Please check the appropriate box below for
1. Did you (student) file a 2017 Tax Return? (individual	
<ul> <li>a. If no, did you work in 2017? ☐ Yes</li> <li>i. If yes, please submit a copies of a</li> </ul>	
ii. If no, please initial the following	
b I was not employed and had no in	acome from work in 2017.
FAFSA?	FAFSA on the Web to transfer 2017 IRS income tax information into the student's
$\square Yes \qquad \square No$ a. If no, please provide a copy of the 201	7 IDS Tay Paturn Transcript(s)
a. If no, please provide a copy of the 201	into rax return transcript(s).
B. PARENT(S) TAX RETURN FILER/NONFILER parents tax information.)	$oxed{C}$ (Parent(s) completes this sections, Please check the appropriate box below for
3. Did you (parents) file a 2017 Tax Return? (individual	ly)
a. If no, did you work in 2017? Yes	
<ul><li>i. If yes, please submit a copies of a</li><li>ii. If no, please initial the following</li></ul>	
b I was not employed and had no in	ncome from work in 2017.
IRS has no record of a 1040, 1040A or 1040EZ for 2017; y	tax return with the IRS. Verification of Non-filing Letter, provides proof that the ou may obtained a copy at <a href="www.irs.gov">www.irs.gov</a> and complete a 4506-T Form at mail to the appropriate address on the form. (Allow 2-3 weeks to be mailed).
4. Did you (parents) used the IRS Data Retrieval Tool on FAFSA?	FAFSA on the Web to transfer 2017 IRS income tax information into the student's
☐ Yes ☐ No	
b. If no, please provide a copy of the 201	7 IRS Tax Return Transcript(s).
908-9946. Make sure to request the "IRS Tax Return Transcript" Number, date of birth, and the address on file with the IRS (normally	RS.gov and click on the "Get Transcript for My Tax Records" link, or call 1-800- and not the "IRS Tax Account Transcript." You will need your Social Security this will be the address used on the 2017 IRS income tax return). It takes up to 2- S tax return filers, and up to eight weeks for paper IRS tax return filers.
SECTION 4: CERTIFICATION AND SIGNATURE	
By signing, I (we) certifies that all of the information reported is con At least one parent whose information was included on the FAFSA re	
Student Signature Date	
Parent's Signature (Required for Dependent student)  Date	
Tarilla Communi	
Tsaile Campus P.O Box C06	Shiprock Campus P.O Box 580
Tsaile AZ, 86556	Shiprock, NM 87420
Ph: (928) 724-6730/6731 Fax: (928)724-6740	Ph: (505) 368-3511/3515 Fax: (505)368-3512