2016-2017 Verification Worksheet

A. Student Information

Last name | First name | M.I. | Student ID# | Phone #
--- | --- | --- | --- | ---

- [ ] I was born before January 1, 1993
- [ ] I am married
- [ ] I will be working on a master’s or doctorate program
- [ ] I am serving on active duty in the U.S. Armed Forces
- [ ] I am a veteran of the U.S. Armed Forces
- [ ] I have children and I provide more than half of their support

If you checked ANY of the boxes above, you are an Independent student. **Complete student information only.**

If you did not check ANY of the boxes above, you are a dependent student. **Complete student and parent information.**

Household Information –

**For Dependent Students:**
Include yourself and your parents and their household members, who they provide more than half of their support for, even if you do not currently live with your parents.

**For Independent Students:**
Include yourself and your spouse, if you are married, and your children and other people if they now live with you and you and/or your spouse provides more than half of their support.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship</th>
<th>College Name / State (If attending)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self</td>
<td>Jefferson Community College / NY</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Was a 2015 Federal Income Tax Return filed by: **Student** ____ Yes ____ No (Spouse if married) ____ Yes ____ No **Parent(s)**, if you are a dependent student ____ Yes ____ No (include parent and their current spouse)

*** If the student and/or spouse or parent(s) does not file a tax return, please list the type and amount of income you receive in section D of this form.

B. Verification of Asset Information

*(Please list the current amount for each line, even if it is zero)*

<table>
<thead>
<tr>
<th>Student (and spouse if married)</th>
<th>Student’s Parent(s) (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash, Savings, and Checking $________</td>
<td>$________</td>
</tr>
<tr>
<td>Net worth of investments $________</td>
<td>$________</td>
</tr>
<tr>
<td>Net worth of businesses and/or $________</td>
<td>$________</td>
</tr>
</tbody>
</table>

investment farms (do not include a farm you live on and operate)

If you (and/or your parent(s), own a business, do you (they) have more than 100 full-time (or full-time equivalent) employees? ____ Yes ____ No

* **Investments include** real estate (do not include the home you live in), rental property, trust funds, money market funds, mutual funds, CD’s, stocks, stock options, bonds, other securities, college savings plans, commodities, etc. **Investments do not include** the home you live in, retirement plans (401k plans, pension funds and annuities, non-education IRA’s, Keog plans, etc.) or the value of life insurance

**Net worth** means current value minus debt.

- Continued On Back -
NOTE: TO AVOID DELAYS DO NOT LEAVE BLANKS

C. Additional Financial Information  (All information pertains to 2015 only)  
If a question does not apply to you (or your spouse or parent(s) if applicable), please enter -0-

Student (and spouse if married)  

Did any household member listed in section A. Receive food stamp (SNAP) benefits during 2014 or 2015?  

_____ Yes  _____No

$_______  Child support paid to someone else during 2015 by:  You, your spouse (if married) or your parent(s) (if you are a dependent student) because of divorce or separation, or as a result of a legal requirement. Please list names and ages of all children for whom support is being paid and the name who it is paid to.

<table>
<thead>
<tr>
<th>Child(ren) names(s):</th>
<th>Age(s):</th>
</tr>
</thead>
</table>

Child support listed above was paid to: $_______

$_______ Taxable earnings from Federal Work-Study or other need-based work programs.  

D. Untaxed Income Received in 2015

| Payments to tax-deferred pension and saving plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 form in Boxes 12a through 12d, and Codes D, E, F, G, H and S. (do not include DD) | $_______ |
| Monthly Child support received during 2015 for all children. Do not include foster care or adoption payments. | $_______ |
| Monthly Veterans’ non-education benefits such as Disability, Death Pensions, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances | $_______ |
| Monthly Amount of any other untaxed income or benefits not reported in sections A & B, such as Worker’s Compensation, untaxed portions of railroad retirement benefits, Black Lung benefits, disability, public assistance etc. Please list the amount and source of your untaxed income on the line below | $_______ |
| Yearly amount of money earned from employment that was not reported on a tax return | $_______ |
| Yearly amount of money received or paid on the student’s behalf | $_______ |

(Please do not leave this question blank)

Please indicate if you and/or your spouse (if married) or parent(s) (if you are a dependent student) were active duty military during 2015

Myself: Yes___ No___  Spouse(if married): Yes___ No___  Parent(s) (if dependent): Yes___ No___  
(please circle one) Enlisted  Officer

$_______ Yearly Housing, food and other living allowances paid to member of the military or clergy

E. Sign this Worksheet  (If required to provide parental information, a parent must also sign)

Each person signing below certifies that all of the information reported is complete and accurate.  

| Student’s Signature | Date | Parent’s Signature (if applicable) | Date |

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

Please return this form to:
Jefferson Community College Financial Services Office