

# 2010 – 2011 Dependent Verification Worksheet

## South Seattle Community College

Your application was selected for review in a process called “federal verification.” You must complete the entire worksheet and submit it to the Financial Aid Office. If you have, or will, file a 2009 federal income tax return, you must also submit a signed copy of your completed tax return. If your parent(s) have, or will, file a 2009 federal income tax return, you must submit a signed copy of their completed federal income tax return(s).

**A. Student Information**

Last name \_\_\_\_\_ First name \_\_\_\_\_ M.I. \_\_\_\_\_  
 SSN \_\_\_\_\_ SID \_\_\_\_\_

**B. Family Information**

List the following people in the chart below: Also include the name of the college for any family member who will be attending college at least half-time and will be enrolled in a degree or certificate program.

- Yourself and your parent(s) (including stepparent)
- Your parent’s other children, even if they don’t live with your parents, if: (a) your parents will provide more than half of their support from July 1, 2010 – June 30, 2011, or (b) the children would be required to provide parental information when applying for Federal Student Aid.
- Other people if they now live with your parents and your parents provide more than one-half of their support and will continue to provide more than one-half of their support from July 1, 2010 – June 30, 2011.

Full name	Age	Relationship to Student	Name of College
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*If you need additional space attach a separate page.*

**C. Student’s Tax Forms and Income Earned from Work**

1. Check one:     I have attached a signed, completed copy of my 2009 federal income tax return & all 2009 W2 forms  
                        I will not file and am not required to file a 2009 federal income tax return

If you will not file and are not required to file a federal tax return for 2009, list the name of your employer(s) in 2009 and the amount(s) you earned.

List Employer(s) <i>Attach W-2s or other earnings statements</i>	Amount(s) earned	<i>If you need additional space, attach a separate page</i>
_____	_____	
_____	_____	
_____	_____	

**D. Parent(s) Tax Forms and Income Earned from Work**

1. Check one:     Completed, signed federal income tax return(s) and W2’s are attached  
                        My parent(s) will not file and are not required to file a 2009 federal income tax return

## D. Parent(s) Tax Forms and Income Earned from Work (continued from page 1)

If your parents will not file and are not required to file a federal income tax return for 2009, list the name of their employer(s) in 2009 and the amount(s) they earned.

List Employer(s) <i>Attach W-2s or other earnings statements</i>	Amount(s) earned	<i>If you need additional space, attach a separate page</i>

## E. Student and Parent Other Income and Benefits

**LISTING MONTHLY AMOUNTS CAN DELAY PROCESSING OF YOUR APPLICATION-  
LIST TOTAL YEARLY AMOUNT RECEIVED IN 2009  
 - DO NOT LIST MONTHLY AMOUNT**

Student (FAFSA Question 44 a-f)	(FAFSA question 92 a-f) Parent(s)
\$ _____ Education credits (Hope and Lifetime Learning tax credits) from IRS Form 1040 (line 49) or 1040A (line 31)	\$ _____
\$ _____ Child support <b>paid</b> because of divorce or separation or as a result of a legal requirement. Do not include support for children in your (or your parents') household, as reported in section B	\$ _____
\$ _____ Taxable earnings from need based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships	\$ _____
\$ _____ Student grants, scholarships reported to the IRS in your adjusted gross income. Includes awards, that was reported to the IRS in your (or your parents') adjusted gross income. Includes AmeriCorps benefits, grant and scholarship portions of fellowships and assistantships	\$ _____
\$ _____ Combat pay or special combat pay. Only enter the taxable amount and included in your adjusted gross income. Do not enter untaxed combat pay reported on the W-2 (Box 12, Code Q)	\$ _____
\$ _____ Earnings from work under a cooperative education program offered by a college	\$ _____
Student (FAFSA question 45 a-j)	(FAFSA question 93 a-i) Parent(s)
\$ _____ 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 Form in Boxes 12a through 12d, codes D, E, F, G, H, and S	\$ _____
\$ _____ IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans from IRS Form 1040 (total of lines 28 + 32) or 1040A (line 17)	\$ _____
\$ _____ Child support <b>received</b> for all children. Do not include foster care or adoption payments	\$ _____
\$ _____ Tax exempt interest income from IRS Form 1040 (line 8b) or 1040A (line 8b)	\$ _____
\$ _____ Untaxed portions of IRA distributions and pensions from (exclude rollovers; if negative, enter a 0): 1040 (line 15a minus 15b) <b>plus</b> (line 16a minus 16b) 1040A (line 11a minus 11b) <b>plus</b> (line 12a minus 12b)	\$ _____
\$ _____ Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits)(do not include base housing	\$ _____
\$ _____ Veterans noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study Allowances	\$ _____
\$ _____ Any other untaxed income or benefits not reported elsewhere on this form, such as worker's compensation, disability, etc. <b>Don't include</b> student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, combat pay, benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion or credit for federal tax on special fuels	\$ _____
\$ _____ Money received, or paid on your behalf (e.g. bills), not reported elsewhere on this worksheet	\$ _____

## F. Sign this Worksheet

By signing this worksheet, we certify that all the information reported on this worksheet is complete and correct. At least one parent must sign.  
**Warning: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to prison, or both.**

Student \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_