

Financial Aid Office

2020-2021 VERIFICATION WORKSHEET V4 and V5 - Witnessed

Student Information

Last Name	First Name	M.I.	Social Security Number		
Dependent Student* *A student is considered dependent if he/she was required to provide parental information on the FAFSA.		• **A stude	Independent Student** **A student is considered independent if he/she was not required to provide parental information on the FAFSA.		
 List the people in your parent(s)' household Including: yourself and your parent(s) (including a stepparent) even if you don't live with your parent(s) and your parent(s)' other children, even if they do not live with your parent(s), if (a) your parent(s) will provide more than half of their support from July 1, 2020 through June 30, 2021, or (b) the children would be required to provide parental information if they were applying for Federal Student Aid, and other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support from 		• yours • your of suppo they d to prov applyin • other more to more to	 List the people in your household Including: yourself and your spouse if you have one, and your children, if you will provide more than half of their support from July 1, 2020, through June 30, 2021, even if they do not live with you, or if the child would be required to provide your information as the parent if they were applying for Federal Student Aid, and other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2020 through June 30, 2021. 		

Important Information:

July 1, 2020 through June 30, 2021.

*Dependent Student: Answer all of the following questions about yourself and the parent(s) reported on the FAFSA **Independent Students: Answer all of the following questions only about yourself, your children and your spouse if married

Write the names of <u>all</u> 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 college at least half-time between July 1, 2020 and June 30, 2021, 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
		Self	South Seattle College

Student – Tax and Income Information

Check only one box below.

- □ I used the IRS Data Retrieval Tool on the FAFSA, no action required.
- □ I did file and am attaching my 2018 IRS Tax Return or Tax Transcript Transcript.
- □ I did not file a 2018 Federal Tax Return but I did have earnings in 2018.
 - Independent Students: You MUST submit proof of Nonfiling from the IRS and copies of all W-2s. Dependent Students: You MUST provide copies of all W-2s.

To get your Nonfiling Letter and/or W-2s, visit this link to locate the IRS Tax Transcript Instructions <u>https://southseattle.edu/financial-aid/2020-2021-financial-aid-forms</u>

I did not file and I did not have any earnings in 2018.
 <u>Independent Students</u>: You MUST obtain proof of Nonfiling from the IRS.
 <u>Dependent Students</u>: No action required.

Parent(s) or Spouse – Tax and Income Information

Check only one box below.

□ My Parent(s) or Spouse used the IRS Data Retrieval Tool on the FAFSA, no action required.

□ My Parent(s) or Spouse did file and are attaching their 2018 IRS Tax Return Transcript.

□ My Parent(s) or Spouse did not file a 2018 Federal Tax Return but they did have earnings in 2018. They MUST submit proof of Nonfiling from the IRS and copies of all W-2s.

To get your Nonfiling Letter and/or W2s, please visit this link to locate the IRS Tax Transcript Instructions: <u>https://southseattle.edu/financial-aid/2020-2021-financial-aid-forms</u>

□ My Parent(s) or Spouse did not file and they did not have any earnings in 2018. They MUST submit proof of Nonfiling from the IRS.

Student – High School Completion Status

Please check only one box and provide required document(s).

- **High School Diploma**. Attached is a copy of my diploma or high school transcript indicating graduation date.
- **GED**. Attached is a copy of my GED certificate.
- □ Home School Graduate. Attached is a transcript signed by my parent or guardian listing the secondary courses completed and documenting the successful completion of secondary school.
- I have not graduated from high school but excelled academically at my high school. Attached is a signed statement from my high school counselor documenting that I excelled academically and my high school transcript.

Student – Identity Verification

- □ I am appearing in person with my valid government-issued photo identification (driver's license, state identification card, or passport). The Financial Aid Office Staff will make a copy.
- □ I am appearing in person to sign the statement below. (Student **must** sign statement in front of Financial Aid Office Staff)

Student - Statement of Educational Purpose MUST BE WITNESSED BY A FINANCIAL AID STAFF MEMBER

- (a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the witnessed statement below, such as but not limited to a driver's license, other state-issued ID, or passport; and
- (b) The original Official Witnessed Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I

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 and to pay the cost of attending South Seattle College for 2020-2021.

Student's Signature	Date	Student's ID Number
Witnessing Financial Aid Staff Member's Signature	Date	

Text Messaging Disclaimer - OPTIONAL

I authorize a Seattle Colleges employee to send text messages to my cell phone to share pertinent information related to my academics. I understand that standard text messaging rates will apply to any messages received from the Seattle Colleges. I also understand that I or Seattle Colleges may revoke this permission at any time. To stop texting communication, please text "stop" in reply, which will remove you from the text messaging distribution list. I agree not to hold the Seattle Colleges liable for any electronic messaging charges or fees generated by this service.

Cell Phone: (____)____-Cell Carrier (Sprint, T-Mobile, etc.): _____

Sign the Worksheet (Please print, then sign and date below)

Each person signing this form certifies that all the information reported on it is complete and correct. The student and at least one parent must sign and date if dependent.

Student Name	Signature	Date
Parent Name	Signature	Date