



COLUMBIA COLLEGE

Tysons Main Campus
 8620 Westwood Center Dr.
 Vienna, VA 22182
 Tel. 703-206-0508
 Fax. 703-206-0488

Centreville Extension
 5940 Centreville Crest Lane
 Centreville, VA 20121
 Tel. 703-266-0508

Silver Spring Extension
 12125 Veirs Mill Road
 Silver Spring, MD 20906
 Tel. 301-929-0565

2016-2017 V5 Independent Aggregate Worksheet

Your **2016–2017 Free Application for Federal Student Aid (FAFSA)** was selected for review in a process called **verification**. The law says that before awarding Federal Student Aid, **Columbia College Office of Student Financial Aid (CC OSFA)** may ask you to confirm the information **you (and your spouse, if you married)** reported on your FAFSA. To verify that you provided the correct information, CC OSFA will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. **You (and your spouse, if you married) whose information was submitted on the FAFSA, must complete and sign this worksheet, attach any required documents, and submit this form and the required documents to CC OSFA.** After a review of the information you submit, the CC OSFA may still ask for additional information. If you have questions about verification, contact the CC OSFA as soon as possible so that the processing of your financial aid will not be delayed.

A. Student's Information

XXX-XX-

_____ Last Name	_____ Middle Initial	_____ First Name	_____ Social Security Number
_____ Street Address (include apt. #)		_____ Date Of Birth (MM/DD/YYYY)	
_____ City	_____ State	_____ Zip Code	_____ Primary Phone
_____ Email Address			

B. Student's Family Information

List the members of your household below. Be sure to include:

- **Yourself** on the first line below.
- **Your spouse, if you are married.** (In accordance with the Defense of Marriage Act (DOMA), same sex couples must report their marital status as married if they were legally married in a state or other jurisdiction (foreign country) that permits same-sex marriage, without regard to where the couple resides).
- **Your children (if any) and your spouse's children, if you and/or your spouse will provide more than half of their support from July 1, 2016 through June 30, 2017, even if the children do not live with you.**
- Other people if they now live with you and you and/or your spouse provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.

In the space below, please include the information about any household member who is, or will be, enrolled at least half-time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time **between July 1, 2016 and June 30, 2017** and include the name of the college. *If more space is needed, attach a separate sheet of paper.*

First and last name of family member	Age	Relationship to student	Name of <u>college</u> the person will attend <u>at least half-time</u> between 07/01/16 – 06/30/17:
		Self	Columbia College

Note: The CC OSFA may require additional documentation if there is reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Student Name: _____

C. Student's Income Information to Be Verified

• TAX RETURN FILERS

***IMPORTANT:** If you (or your spouse, if married) filed, or will file, an extension, an amended or foreign 2015 IRS tax return, please contact the CC OSFA before completing this section.

***INSTRUCTIONS:** Complete this section if you (and spouse, if married), filed or will file a **2015 income tax return with the IRS**. *The best way to verify income is by using the IRS Data Retrieval Tool when applying for FAFSA. If you have not already used the tool, you should go to fafsa.gov, log-in to your FAFSA record, select "Make FAFSA Corrections," and navigate to the Financial Information section of the form. From there, follow the instructions to determine if you are eligible to use the IRS Data Retrieval Tool to transfer 2015 IRS income tax information into your FAFSA. **In most cases, for electronic IRS tax return filers, it takes two to three weeks for IRS income information to be available for the IRS Data Retrieval Tool, and six to eight weeks for paper IRS tax return filers.** If you need more information about how to use the IRS Data Retrieval Tool, contact 1-800-4FED-AID (or 1-800-433-3243).*

Check the box that applies:

- I have used the IRS Data Retrieval Tool in the FAFSA to transfer my (and my spouse's, if married) **2015 IRS income information** into my FAFSA, either on the initial FAFSA or when making a correction to the FAFSA.
- I have not yet used the IRS Data Retrieval Tool in the FAFSA, but I will use the tool to transfer my (and, if married, my spouse's) **2015 IRS income information** into my FAFSA once I have filed a **2015 IRS tax return**.
➤ See the instructions above for the information on how to use the IRS Data Retrieval Tool. The CC OSFA cannot complete the verification process until the IRS information has been transferred into your FAFSA.
- I am unable or choose not to use the IRS Data Retrieval Tool in the FAFSA and I will submit to the CC OSFA a **2015 IRS tax return transcript—not a photocopy of the income tax return**.
➤ To obtain a 2015 IRS tax return transcript, go to www.irs.gov, and under "Tools", click on the "Get a Tax Transcript" link; or call 1-800-908-9946. You may also download the Apple or Google IRS Apps online or submit a Paper Request IRS Form 4506T-EZ or 4506-T. **Make sure to request the "IRS tax return transcript" and not the "IRS tax account transcript."** You will need your Social Security Number, date of birth, and the address on file with the IRS (the address should be the one that you used when the 2015 IRS tax return was filed). **If you are married, and you and your spouse filed 2015 tax returns separately, a 2015 tax return transcript must be submitted for both you and your spouse.**
- A 2015 IRS tax return transcript is attached to this worksheet.
- A 2015 IRS tax return transcript will be submitted to the CC OSFA later. The CC OSFA cannot complete the process of your financial aid until the IRS tax return transcript has been submitted to the CCOSFA.

• TAX RETURN NONFILERS

Complete this section if you (and your spouse, if married), will not file and is not required to file a **2015 income tax return** with the IRS.

Check the box that applies:

- I (and my spouse, if married) was not employed and had no income earned from work in **2015**.
- I (and/or my spouse, if married) was employed in 2015 and have listed below the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is attached. **Attach the copies of all 2015 IRS W-2 forms issued to you (and to your spouse, if married).** List every employer even if they did not issue an IRS W-2 form. If more space is needed, attach a separate sheet of paper.

Employee's name (e.g. You and/or your spouse)	Employer's name	Amount earned in 2015	IRS W-2 attached? <u>Y/N</u>
Total amount of income earned from work:	\$		

Note: The CCOSFA may require you to provide the documentation from the IRS that indicates your 2015 IRS income tax return was not filed with IRS.

Student Name: _____

D. Student's Other Information to Be Verified

1. Complete this section if the member(s) in your household (listed in Section B) received benefits from the **Supplemental Nutrition Assistance Program (SNAP)** or **food stamps** any time **during the 2014 or 2015 calendar years**.

*SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (or 1-800-433-3243).

Indicate the total amount of SNAP benefits received in 2014 and/or 2015 for any member of your household:

\$ _____ 2014 \$ _____ 2015

Note: If the CC OSFA has reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, additional documentation will need to be requested from the agency that issued the SNAP benefits in 2014 and/or 2015.

2. Complete this section if you (and/or your spouse, if married) **paid child support in 2015**:

I (and/or my spouse, if married) listed in Section B **paid child support in 2015**. I have indicated below the name of the person who paid the child support and the name of the person to whom the child support was paid, the name(s) and age (s) of the children for whom child support was paid, and the total annual amount of child support that was paid in 2015 for each child. If asked by the CC OSFA, you may need to provide additional documentation of the payment of child support. *If you need more space, attach a separate sheet of paper.*

Name of person who paid child support	Name of person to whom child support was paid	Name of child for whom support was paid	Age of child	Amount of child support paid in 2015
<i>Ex. Joe Jones</i>	<i>Jane Doe</i>	<i>Jake Jones</i>	<i>15</i>	<i>\$6,000</i>

Note: The CC OSFA may require additional documentation if there is reason to believe that the information regarding child support paid is inaccurate.

E. High School Completion Status

You must provide one of the following documents to the CC OSFA in order to verify your high school completion.

- A copy of high school diploma or final official high school transcript** that shows the date when the diploma was awarded.
- A state certificate or transcript** received by the student after the student passed a **State-authorized examination** (GED test, HISET, TASC, or other State-authorized examination) that the State recognizes as the equivalent of a high school diploma.
- Academic transcript** that indicates the student successfully completed at least a **two-year program** that is acceptable for full credit toward a **bachelor's degree**.
- A copy of the "secondary school leaving certificate" or other similar document**, for students who completed the secondary education in a foreign country.
- If State law requires a **homeschooled student** to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), **a copy of that credential**.
- If State law does not require a homeschooled student to obtain secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), **a transcript or the equivalent, signed by the student's parent or guardian**, that lists the secondary school courses the student completed and includes a statement that the student successfully completed a secondary school education in a homeschool setting.

Student Name: _____

F. Documentation of Identity/Statement of Educational Purpose

*****DO NOT COMPLETE THIS SECTION UNTIL YOU ARE EITHER **IN PERSON** AT THE CC OSFA OR **IN THE PRESENCE OF A NOTARY*******

In order to complete the Verification process, you will need to appear **in person** at the CC OSFA and present an unexpired valid government-issued photo ID (such as a driver’s license, military ID, passport, etc.) and this verification worksheet to the Office. The CC OSFA will need to validate the statement below at the time of submission by maintaining a copy of your photo ID and by providing a signature and date. ***If you cannot appear in person to submit this worksheet, you will need to provide a copy of your government-issued photo ID and this worksheet notarized by a public notary to the CC OSFA.***

Statement of Educational Purpose

I certify that I, _____, am the individual signing this Statement of Educational Purpose and that the Federal
(Student’s Name)
student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Columbia College
for 2016-2017.

Student’s Signature

Date

Financial Aid Staff’s Signature

Date

OR

Notary’s Signature

Date

If the student is unable to appear in person, have a notary to complete the Notary’s Certificate of Acknowledgement below.

G. Notary’s Certificate of Acknowledgement:

State of _____

County of _____

On _____, before me, _____, personally appeared
(Date) (Title of the officer)

_____, who proved to me on the basis of satisfactory evidence to be the person(s) whose
(Name of the officer)

name(s) is/are subscribed to the within instrument and acknowledged to me that he/she they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of _____ that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature of Notary Public _____ (Seal)

Student Name: _____

H. Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on this form is complete and correct.
If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.
The student (and his or her spouse, if married) must sign and date below.

Student's Signature

Date

Spouse's Signature

Date

Submit this worksheet to the CC OSFA.

You should make a copy of this worksheet for your records.