

A. Student's Information

Tysons Campus

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

2024-2025 V5 Independent Aggregate Worksheet

Your 2024 –2025 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.

| ast Name | Middle Initial | First Name | | Social Security Number |
|---------------------------------|----------------|------------|---------|----------------------------|
| Street Address (include apt. #) | | | | Date Of Birth (MM/DD/YYYY) |
| City | | State | ZipCode | Primary Phone |

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), <u>same sex couples</u> must report their marital status <u>as married</u> 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, 2024 through June 30, 2025, even if the children do not live with you.
- Other people if they now live with you and you and/or your spouse <u>provide more than half of their support</u> and <u>will</u> continue to provide more than half of their support **through June 30, 2025**.

In the space below, please include the information about any household member who is, or will be, enrolled <u>at least half-time</u> in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time **between July 1, 2024 and June 30, 2025** 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 07/01/24 -06/30/25: |
|--------------------------------------|-----|----------------------------|---|
| | | 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.

| ent Name: Student's Income Information to Be Verified | | | |
|---|---|--|--|
| TAX RETURN FILERS | | | |
| *IMPORTANT: If you (or your spouse, if married contact the CC OSFA before completing this set INSTRUCTIONS: Complete this section if you (a | ection. and spouse, if married), <u>filed or will file</u> a | 2022 income tax return w | rith the IRS. The |
| best way to verify income is by using the IRS E you should go to fafsa.gov, log-in to your FAF. section of the form. From there, follow the in transfer 2022 IRS income tax information into | SA record, select <u>"Make FAFSA Correctio</u> nstructions <u>to determine if you are eligi</u> o your FAFSA. <mark>In most cases, for electro</mark> | ns," navigate to the <u>Finan</u> ible to use the IRS Data F onic IRS tax return filers, | ncial Information Retrieval Tool to it takes <u>two to</u> |
| three weeks for IRS income information to b tax return filers. If you need more information 1-800-4FED-AID (or 1-800-433-3243). | - | | <u>ks</u> joi pupei iks |
| Check the box that applies: | | | |
| I <u>have used</u> the IRS Data Retrieval Tool in the into my FAFSA, either on the initial FAFSA of | | | me information |
| I <u>have not yet used</u> the IRS Data Retrieval T spouse's) 2022 IRS income information int | | • • | ed, my |
| | mation on how to use the IRS Data Retriev mation has been transferred into your FAI | | ot complete the |
| I <u>am unable or choose not to use</u> the IRS Dareturn transcript—not a photocopy of the | | submit to the CC OSFA a 20 | 022 IRS tax |
| or call 1-800-908-9946. You may als Form 4506T-EZ or 4506-T. <u>Make sure</u> You will need your Social Security Nurone that you used when the 2022 IRS | cript, go to <u>www.irs.gov</u> , and under "Tool o download the Apple or Google IRS Ap to request the " IRS tax return transcript mber, date of birth, and the address on fi tax return was filed). If you are marrie urn transcript must be submitted for both | ops online or submit a Pa " and not the "IRS tax acco le with the IRS <u>the (addre</u> d, and you and your sp | per Request IRS ount transcript." ess should be the |
| A 2022 IRS tax return transcript is atto | ached to this worksheet. | | |
| | e summited to the CC OSFA later. The CC or ranscript has been submitted to the CCOS | · | process of your |
| TAX RETURN NONFILERS | | | |
| Complete this section if you (and your spouse, if I | married), <u>will not file</u> and <u>is not required t</u> | o file a 2022 income tax re | eturn with the IRS. |
| Check the box that applies: I (and my spouse, if married) was not empl | oved and had no income earned from wo | ork in 2022 | |
| I (and/or my spouse, if married) was emple earned from each employer in 2022, and vissued to you (and to your spouse, if marrineeded, attach a separate sheet of paper. | oyed in 2022 and have listed below the r whether an IRS W-2 form is attached. <u>At</u> t | names of all employers, thach the copies of all 2022 | IRS W-2 forms |
| Employee's name (e.g. You and/or your spouse) | Employer's name | Amount earned in 2022 | IRS W-2 attache Y/N |
| | | | |
| | | | |
| Total amount of income earned from work: | \$ | | |

| D. High S | ne: | |
|---|--|---|
| | chool Completion Status | |
| You m | ust provide <u>one</u> of the following docu | ments to the CC OSFA in order to verify your high school completion. |
| A c | copy of high school diploma or final offi | icial high school transcript that shows the date when the diploma was awarded. |
| | · | y the student after the student passed a State-authorized examination (GED test, HiSET, nation) that the State recognizes as the equivalent of a high school diploma. |
| | ademic transcript that indicates the stuward a bachelor's degree. | udent successfully completed <u>at least</u> a two-year program that is acceptable for full credit |
| | 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 . | | |
| tha | an a high school diploma or its recogni | nooled student to obtain secondary school completion credential for homeschool (other zed equivalent), a transcript or the equivalent, signed by the student's parent or guardian, the student completed and includes a statement that the student successfully completed eschool setting. |
| *****[In orde goverr OSFA v signatu | er to complete the Verification proces nment-issued photo ID (such as a drive will need to validate the statement be | IL YOU ARE EITHER IN PERSON AT THE CC OSFA OR IN THE PRESENCE OF A NOTARY***** ss, you will need to appear in person at the CC OSFA and present an unexpired valid er's license, military ID, passport, etc.) and this verification worksheet to the Office. The CC elow at the time of submission by maintaining a copy of your photo ID and by providing a nerson to submit this worksheet, you will need to provide a copy of your government- issued |
| photo | | |
| - | nent of Educational Purpose | |
| Statem | y that I, | , am the individual signing this Statement of Educational Purpose and that the Federal |
| Staten I certif | y that I, (Student's Name) | , am the individual signing this Statement of Educational Purpose and that the Federal vill only be used for educational purposes and to pay the cost of attending Columbia College |
| Statem I certif studer | y that I, (Student's Name) | |
| Statem I certif studer | y that I <u>,</u> (Student's Name) nt financial assistance I may receive w | |
| Statem I certif studer | y that I <u>,</u> (Student's Name) nt financial assistance I may receive w 24-2025. | rill only be used for educational purposes and to pay the cost of attending Columbia College Date |
| Statem I certif studer | y that I, (Student's Name) It financial assistance I may receive w 24-2025. Student's Signature | rill only be used for educational purposes and to pay the cost of attending Columbia College Date |
| Staten I certif studer | y that I, (Student's Name) It financial assistance I may receive w 24-2025. Student's Signature Financial Aid Staff's Signat | rill only be used for educational purposes and to pay the cost of attending Columbia College Date |

| Stud | lent Name: | | | |
|---|--|--|--|--|
| F. | Notary's Certificate of Acknowledgement: | | | |
| | State of | - | | |
| | County of | - | | |
| | On, before me, | , , personally appeared (Title of the officer) | | |
| | (Date) (Name of the officer) | who proved to me on the basis of satisfactory evidence to be the person(s) whose | | |
| | , , , , , , , , , , , , , , , , , , , | ument 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 w the person(s) acted, executed the instrument. | | | |
| | | | | |
| | I certify under PENALTY OF PERJURY unde | r 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) | | |
| G. | Certification and Signatures | | | |
| | | that all of the information reported on this form is complete and correct. mation on this worksheet, you may be fined, be sentenced to jail, or both. d) must sign and date below. | | |
| Student's Signature Date Spouse's Signature Date | | Date | | |
| | | Date | | |

Submit this worksheet to the CC OSFA.

 ${\it You should make a copy of this worksheet for your records.}$