

Lawson State Community College 2019-2020 Verification Worksheet Federal Student Aid Programs

Your application was selected for review in a process called “verification.” In this process, we will be comparing information from your application with selected verification items as deemed required by the US Dept. of Ed. If there are differences between your application information and your Financial documents, we may need to make corrections electronically. **Your financial aid will not be processed until verification has been completed; therefore, please provide the required documents as soon as possible to prevent a delay in your financial aid.**

Student Information

Last Name	First Name	M.I.	Student ID Number
Address (include apt. no.)			Date of Birth
City	State	Zip Code	Phone Number (include area code)

Family Information

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, 2019, through June 30, 2020, even if they do not live with you, 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, 2019, through June 30, 2020.

Write your name and the names of all household members in the spaces below. Also write in the name of the college for any household member, who will be attending at least half time between July 1, 2018, and June 30, 2019, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

<i>FULL NAME</i>	<i>AGE</i>	<i>RELATIONSHIP</i>	<i>COLLEGE if enrolled at least half time</i>
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>	<i>Lawson State Community College</i>
		S E L F	

TAX FORMS AND INCOME INFORMATION

Check **one** box only in each column. Request a tax transcript, free of charge, from the Internal Revenue Service by phone (1-844-545-5640) or on-line at www.irs.gov. Verification cannot be completed until the IRS tax transcript(s) has been submitted to the College.

STUDENT

- I retrieved tax information from IRS and did not change it.
- Check and attach **signed 2017 U.S. tax transcript.**
- Check here if you **will not** file and **are not** required to file a 2017 U.S. Income Tax Return. If applicable, submit W-2(s).

SPOUSE

- I retrieved tax information from IRS and did not change it.
- Check and attach **signed 2017 U.S. tax transcript.**
- Check here if you **will not** file and **are not** required to 2017 U.S. Income Tax Return. If applicable, submit W-2(s).

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Use the tables below to report annual amounts.

Student	2017 Additional Financial Information	Spouse
\$	Education credits (American Opportunity, Hope or Lifetime Learning tax credits) from IRS Form 1040 (line 49) or 1040A (line 31) .	\$
2017 Untaxed Income		
\$	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 forms in Boxes 12a through 12d, codes D, E, F, G, H, and S .	\$
\$	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh, and other qualified plans from IRS Form 1040 (total of lines 28 plus 32) or 1040A (line 17) .	\$
\$	Tax exempt interest income from IRS Form 1040 (line 8b) or 1040A (line 8b) .	\$
\$	Untaxed portions of IRA distributions from IRS Form 1040 (lines 15a minus 15b) or 1040-A (lines 11a minus 11b) . Exclude rollovers. If negative, enter a zero here.	\$
\$	Untaxed portions of pensions from IRS Form 1040 (lines 16a minus 16b) or 1040-A (lines 12a minus 12b) . Exclude rollovers. If negative, enter a zero here.	\$

NON TAX FILERS Only

If you and/or your spouse did not file (and are not required to file a 2017 Federal income tax return), list below employer(s) and any income received in 2017. **A copy of your W-2(s) and IRS non-filer form is required.**

Student's Employer(s)	2017 Amount

Spouse's Employer(s)	2017 Amount

Independent Student's Other Information to Be Verified

1. Complete this section if someone in the student's household (listed in Family Information) received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2017 or 2018 calendar years.

I certify that a member of my household, as listed in Family Information of this worksheet, received SNAP benefits in 2017 or 2018. If requested, I will provide documentation of the receipt of SNAP benefits during 2017 and/or 2018.

2. Complete this section if you or your spouse paid child support in 2017.

I and/or my spouse (who is listed in Family Information of this worksheet) paid child support in 2017. I have indicated below the name of the person who paid the child support, the name of the person to whom the child support was paid, the name(s) of the child(ren) for whom child support was paid, and the total annual amount of child support that was paid in 2017 for each child. If requested, I will provide documentation of the payment of child support. *If you need more space, attach a separate page.*

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Amount of Child Support Paid in 2017
<i>Marty Jones</i>	<i>Chris Smith (example)</i>	<i>Terry Jones</i>	<i>\$6,000.00</i>

Sign this Worksheet

By signing this worksheet, we certify that all the information reported, to qualify for Federal student aid, is complete and correct.

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

Student Date

RETURN FORM TO LAWSON STATE COMMUNITY COLLEGE AT ONE OF THE ADDRESSES BELOW

Bessemer Campus
1100 9th Avenue, SW
Bessemer, Alabama 35022

Birmingham Campus
3060 Wilson Road SW
Birmingham, AL 35221