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Submit your documents securely at: <a href="https://liquidfiles.dc3.edu/filedrop/FinancialAid">https://liquidfiles.dc3.edu/filedrop/FinancialAid</a>

## 2020-2021 Verification Worksheet Independent Student - V1

			XXX - XX -	
Student's Last Name	Student's First Name	Student's M.I.	Student's SSN (last 4 only)	
Student's Mailing Address (include apt. no.)			Student's Date of Birth	
City	State	Zip Code	Student's Email Address	
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone number	

## B. Student's Family Information:

Number of Household Members: List below the people in the <u>student's household</u>. Include:

- The student
- The student's spouse, if the student is married
- The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2020, through June 30, 2021, even if a child does not live with the student
- Other people if they now live with the student and the student or spouse provide more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2021.

Number in College: Include in the space below 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, 2020, and June 30, 2021, and include the name of the college. If more space is needed, provide a separate page with the student's name and ID number at the top.

Full Name – Begin with yourself (List All Other Household Members whether or Not They Attend College – 1 per line below yourself	Age	Relationship	College	Will be enrolled at least half-time
Missy Jones (example)	18	Sister	Central University	Yes

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

	Student ID#	ID#	
		IV1	
Income Information:			

C. Income Info	ormation:				
Check here if you will not file and are not required to file a			Student		
2018 U. S. Income Ta	<del>-</del>		Spouse		
	vill not file and are not required to file a 2018 fede and income received in 2018. You and your spous				
Amount for Student	Employer's Name		IRS W-2 or W-2 Transcript?	Amount for Spouse	
\$24,000.00	(Example) Dollar Store		Yes		
	(Example) ABC's Auto Body Shop - Spouse		Yes	\$24,000.00	
	iled taxes in <b>2018</b> , and did not use the option to troouses <b>2018 IRS Tax Return Transcript</b> or go back i				
I will provide document Supplemental Supplemental Free or Reduce Temporary As Special Supple I did not rece	ou, your spouse, or anyone in your household receitation of benefits received.  Security Income (Not SSD)  Nutrition Assistance Program or SNAP (formerly led Price School Lunch ssistance for Needy Families (TANF)  emental Nutrition Program for Women, Infants, and ive any of the benefits above in 2018 or 2019  boxes above, I realize that I am certifying the accur	known as the Food Sta	amps Program)		
	any benefits is inaccurate, I understand the Financi				
D. Certification and Signatures		-	WARNING: If you purposely give false or misleading information on this Worksheet, you may be fined, be sentenced to jail, or both.		
Each person signing	g this worksheet certifies that all of the information	n reported on it is com	nplete and correct.		
 Student's Signatu	ıre		Date		

Submit your documents securely at: <a href="https://liquidfiles.dc3.edu/filedrop/FinancialAid">https://liquidfiles.dc3.edu/filedrop/FinancialAid</a>

Date

Spouse's Signature

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to Dodge City Community College. You should make a copy of this worksheet for your records.