Your 2015-2016 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, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent, if dependent, whose information was reported on the FAFSA must complete and sign this verification document, attach any required documents, and submit the form and other required documents to the Office of Student Services. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

### A. Student Information

<table>
<thead>
<tr>
<th>Student’s Last Name</th>
<th>First Name</th>
<th>Middle</th>
<th>Social Security Number</th>
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<tbody>
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<table>
<thead>
<tr>
<th>Student’s Street Address (include apt. no.)</th>
<th>Student’s Date of Birth</th>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Student’s Email Address</th>
</tr>
</thead>
<tbody>
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<thead>
<tr>
<th>Student’s Home Phone Number (include area code)</th>
<th>Student’s Alternate or Cell Phone Number</th>
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</table>

### B. Family Information:

**Dependent**

On the next page, list the people in the **parents’ household**, including:
- The student.
- The parents (including a stepparent) even if the student doesn’t live with the parents.
- The parents’ other children if the parents will provide more than half of the children’s support from July 1, 2015, through June 30, 2016, or if the other children would be required to provide parental information if they were completing a FAFSA for 2015-2016. Include children who meet either of these standards even if the children do not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of the other people’s support and will continue to provide more than half of their support through June 30, 2016.

**Independent**

On the next page, list the people in the **student’s household**, including:
- 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, 2015, through June 30, 2016, even if the children do not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of the other people’s support and will continue to provide more than half of their support through June 30, 2016.
Write the names of all household members in the spaces below. Include information about any household member who 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, 2015, and June 30, 2016, include the name of the college. DO NOT include college information for parents.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship</th>
<th>College Attending</th>
<th>Enrolled at Least Half Time (Yes or No)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SELF</td>
<td></td>
<td></td>
<td>BEVILL STATE COMMUNITY COLLEGE</td>
<td></td>
</tr>
</tbody>
</table>

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.

C. Receipt of SNAP Benefits

The student certifies that ____________________________, a member of the student/parents’ household, received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2013 or 2014. 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 (1-800-433-3243).

Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2013 or 2014.

D. Child Support Paid for 2014

(Independent) The student or spouse, who is a member of the student’s household, paid child support in 2014.

(Dependent) One of the parents included in the household or the student paid child support in 2014.

List below the names of the persons who paid child support, the names of the persons to whom the child support was paid, the names of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2014 for each child. Don’t include support for children in the household.

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Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation, such as: 1. A copy of the separation agreement or divorce decree that shows the amount of child support to be provided; 2. A signed statement from the individual receiving the child support certifying the amount of child support received; or 3. Copies of the child support payment checks, money order receipts, or similar records of electronic payments having been made.

E. High School Completion Status

Provide one of the following documents that indicate the student’s high school completion status when the student will begin college in 2015-2016.

- A copy of the student’s high school diploma.
- A copy of the student’s final official high school transcript that shows the date when the diploma was awarded.
- A copy of the student’s General Educational Development (GED) certificate or GED transcript or a state-authorized high school equivalent certificate.
- An 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 student’s homeschooled transcript, or the equivalent, signed by the parent or guardian that lists the secondary school courses completed by the student and documents the successful completion of a secondary school education.
F. Identity and Statement of Educational Purpose (To Be Signed at Bevill State)

The student must appear in person at Bevill State Community College to verify his or her identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport. The institution will maintain a copy of the student’s photo ID that is annotated by the institution with the date it was received and reviewed and the name of the official at the institution authorized to collect the student’s ID.

In addition, the student must sign, in the presence of the institutional official, the following English or Spanish Statement:

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 Bevill State Community College for 2015-2016.

___ ___________________________  ___________________________
Student’s Signature                        Date

___ ___________________________
Student’s ID Number

___ ___________________________
BSCC Official

G. Certifications and Signatures

Each person signing below certifies that all the information reported is complete and correct. If student is Dependent, the student and one parent whose information was reported on the FAFSA MUST sign and date.

<table>
<thead>
<tr>
<th>Print Student’s Name</th>
<th>Student’s ID#</th>
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</thead>
<tbody>
<tr>
<td>______________________</td>
<td>______________</td>
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</table>

<table>
<thead>
<tr>
<th>Student’s Signature</th>
<th>Date</th>
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<tr>
<td>______________________</td>
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</table>

<table>
<thead>
<tr>
<th>Parent’s Signature</th>
<th>Date</th>
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<tbody>
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<td>______________________</td>
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</table>

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

MAIL COMPLETED FORMS TO:  
BEVILL STATE COMMUNITY COLLEGE  
C/O FAS CPC  
1411 INDIANA AVENUE  
JASPER, AL 35501  
FAX: 205-221-1841

Do not mail this worksheet to the Department of Education.

It is the official policy of the Alabama Department of Postsecondary Education, including postsecondary institutions under the control of the State Board of Education, that no person shall, on the grounds of race, color, handicap, gender, religion, creed, national origin, or age, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program, activity, or employment. Bevill State Community College will make reasonable accommodations for qualified disabled applicants or employees.
Identity and Statement of Educational Purpose
(To Be Signed With Notary)

If the student is unable to appear in person at Bevill State Community College to verify his or her identity, the student must provide:

(a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as, but not limited to a driver’s license, other state-issued ID, or passport; and

(b) The original notarized Statement of Educational Purpose (in English or Spanish) 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 Bevill State Community College for 2015-2016.

________________________________________  ________________
Student’s Signature                           Date

________________________________________
Student’s ID Number

Notary’s Certificate of Acknowledgement

State of ________________________________ City/County of ________________________________

On __________________________, before me, ________________________________, personally appeared,

______________________________, and proved to me on basis of satisfactory evidence of identification

______________________________, to be the above-named person who signed the foregoing instrument.

Type of government-issued photo ID provided

WITNESS my hand and official seal

(Seal)

________________________________________
Notary Signature

My commission expires on __________________

Date