



Your 2020-2021 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states 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 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

Last Name			First Name	Middle	Date of Birth
Street Address (include apt. no.)					Social Security Number
City		State	Zip Code		Email Address
Home Phone Number (include area code)					Alternate or Cell Phone Number

B. Family Information

How to determine who should be listed in the household:

The people in the student's household, includes:

- 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 provides 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 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, 2020, and June 30, 2021, include the name of the college.

****Write the names of all household members in the spaces below regardless of college enrollment status.**

Full Name	Age	Relationship	College Attending	Enrolled at Least Half Time (Yes or No)
		SELF	BEVILL STATE COMMUNITY COLLEGE	

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.

CHILD SUPPORT PAID – I certify that that I, or spouse if married, **paid** child support in 2018. I understand that I may be requested to provide additional documentation of the payment of the child support. Do not include child support received in this section. Fill out the table below.

Name of Person Who Paid Support	Name of Person to Whom Child Support Was Paid to	Name of Child for Whom Support Was Paid for	Age of Child	Total Amount of Child Support Paid in 2018

C. Student & Spouse Tax Forms and Income Information (all Applicants)

The instructions below apply to the student and spouse, if married.

- The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web at FAFSA.gov. **Unless you used the IRS Data Retrieval Tool on FAFSA on the Web, you must submit a signed copy of your 2018 Tax Return and all applicable schedules or request a copy of your 2018 IRS Tax Return Transcript from the IRS.** This may be obtained through:
 - Get Transcript by MAIL** – Go to www.irs.gov, click “Get Your Tax Record.” Click “Get Transcript by Mail.” Make sure to request the “Return Transcript” and **NOT** the “Account Transcript.” The transcript is generally received within 10 business days from the IRS’s receipt of the online request.
 - Get Transcript ONLINE** – Go to www.irs.gov, click “Get Your Tax Record.” Click “Get Transcript Online.” Make sure to request the “Return Transcript” and **NOT** the “Account Transcript.” To use the Get Transcript Online tool, the user must have (1) access to a valid email address, (2) a text-enabled mobile phone (pay-as-you-go plans cannot be used) in the user’s name, and (3) specific financial account numbers (such as a credit card number or an account number for a home mortgage or auto loan). The transcript displays online upon successful completion of the IRS’s two-step authentication.
 - Automated Telephone Request** – 1-800-908-9946. Transcript is generally received within 10 business days from the IRS’s receipt of the telephone request.
 - Paper Request Form** – IRS Form 4506T-EZ or IRS Form 4506-T. The transcript is generally received within 10 business days from the IRS’s receipt of the request.
- If you did not file taxes, please provide a copy of all 2018 IRS W-2 Forms for each source of employment income received for the tax year **AND Confirmation of Non-Filing** from the IRS.

Student Check one	IF YOU FILED TAXES...	Spouse Check one																								
<input type="checkbox"/>	I have used the IRS Data Retrieval Tool to retrieve and transfer my 2018 IRS income information into the student’s FAFSA. Proceed to Section D.	<input type="checkbox"/>																								
<input type="checkbox"/>	I have not used the IRS Data Retrieval Tool when filing the FAFSA on the web. I have attached my 2018 U.S. Tax Return Transcript or a signed copy of my 2018 tax return and all applicable schedules to this worksheet.	<input type="checkbox"/>																								
IF YOU DID NOT FILE TAXES – a confirmation of non-filing is required																										
<input type="checkbox"/>	Check here if you and/or your spouse worked, but did not file, and were not required to file a 2018 Federal income tax return. Then list the names of all employers and any incomes received in 2018 below. Copies of your W-2 forms are required.	<input type="checkbox"/>																								
	<table border="1"> <thead> <tr> <th>Student’s Employer’s</th> <th>2018 Wages</th> <th>W-2 Required</th> <th>Spouse’s Employer(s)</th> <th>2018 Wages</th> <th>W-2 Required</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td style="text-align: center;">YES</td> <td></td> <td></td> <td style="text-align: center;">YES</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">YES</td> <td></td> <td></td> <td style="text-align: center;">YES</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">YES</td> <td></td> <td></td> <td style="text-align: center;">YES</td> </tr> </tbody> </table>	Student’s Employer’s	2018 Wages	W-2 Required	Spouse’s Employer(s)	2018 Wages	W-2 Required			YES			YES			YES			YES			YES			YES	
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		YES			YES																					
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		YES			YES																					
<input type="checkbox"/>	Check here if either you or both you and your spouse were not employed and had no earned income from work in 2018. A confirmation of non-filing is required from each of you.	<input type="checkbox"/>																								

D. Untaxed Income for 2018

If any item does not apply, enter “N/A” for Not Applicable where a response is requested, or enter “0” in an area where an amount is requested. Answer each question below as it applies to the student and the student’s spouse.

• **Child Support Received**

List actual amount of any child support received in 2018 for the children in your household. **Do not include** foster care payments, adoption payments or any amount that was court-ordered but not actually paid.

Name of Adult Who Received Child Support	Name of Child For Whom Support Was Received	Annual Amount of Child Support Received in 2018
Total Amount of Child Support Received in 2018		\$

• **Additional Information: (If you reported low or no earned income, this section must be completed.)**

So that we can fully understand the student’s family’s financial situation, please indicate if you or anyone in your household received benefits in 2018 or 2019 from any of the federal programs listed? Mark all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Medicaid or Supplemental Security Income (SSI) | <input type="checkbox"/> Free or Reduced Price Lunch |
| <input type="checkbox"/> Supplemental Nutrition Assistance Program (SNAP) | <input type="checkbox"/> Temporary Assistance for Needy Families (TANF) |
| <input type="checkbox"/> Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) | |

Add comments regarding your family’s financial situation, please provide information about any other resources, benefits, & other amounts received by the student and any members of the student’s household. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office. This should include Social Security benefits, etc.: (If additional space is needed, attach explanation.)

E. Certifications and Signatures

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

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

Student’s Signature

Date

MAIL COMPLETED FORMS TO:
BEVILL STATE COMMUNITY COLLEGE
C/O FASCPC
1411 INDIANA AVENUE
JASPER, AL 35501

Do not mail this worksheet to the Department of Education.