



## OFFICE OF FINANCIAL AID

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# 2018-2019 Dependent Verification Worksheet

Student's Last Name	Student's First Name	Student's FCC ID#

Your 2018-2019 Free Application for Federal Student Aid (FAFSA) was selected for verification. The law (34 CFR, Part 668) says that before awarding federal student aid, we may ask you to confirm the information you and your parents reported on your FAFSA. This form must have the appropriate signatures and be accompanied by any other documentation (including 2016 Federal Income Tax Return Transcripts and 2016 Wage & Income Transcripts, if applicable) that is requested to complete verification. ***IF THIS FORM IS NOT COMPLETED AND SUBMITTED WITH REQUIRED DOCUMENTATION, FCC WILL BE UNABLE TO DETERMINE YOUR FINANCIAL AID ELIGIBILITY.***

### Household Information

Below, list your legal (biological, adoptive, or allowed by the state on your birth certificate) parent(s) with whom you lived most in the 12 months prior to the date of your FAFSA submission and whose information you reported on the FAFSA. Also, list their legal spouse. If you do not live with either legal parent, list the legal parent (and their legal spouse) who provided more financial support to you in the 12 months prior to the date of your FAFSA. If your legal parents live together and are not married, list both below.

Relationship to Student	Full Name	DOB	Is this your biological parent, adoptive parent or step-parent?
Parent 1			<input type="checkbox"/> Biological <input type="checkbox"/> Adoptive <input type="checkbox"/> Step-parent
Parent 2			<input type="checkbox"/> Biological <input type="checkbox"/> Adoptive <input type="checkbox"/> Step-parent

In the box below, list:

- (1) Your siblings (and step-siblings), if the parent(s) you listed above will provide more than ½ of their financial support from July 1, 2018 through June 30, 2019. Also include siblings who would be required to provide the above listed parents' financial information on their own FAFSA.
- (2) Any other person who currently lives with the parent(s) you listed above, if those parent(s) provide more than ½ of the person's financial support AND will continue to do so through June 30, 2019.

Relationship to Student	Full Name	DOB	List Full College Name, If Attending*	Enrollment at least ½ time?**
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

\*If any person you listed above will be enrolled in a Title IV eligible postsecondary educational institution at least ½ time in a degree, diploma, or certificate program at any time between July 1, 2018 and June 30, 2019, list the full name of the college above. Do not include any sibling who is dually enrolled in college while still attending high school.

\*\* Enrollment must be during the 2018-2019 academic year (7/1/2018-6/30/2019). Generally, "half-time" enrollment means 6-8 credit hours per semester.



## 2016 FEDERAL INCOME TAX RETURN FILING STATUS

### Student Filing Status

#### If you filed your 2016 Federal Taxes, complete this section:

- ☐ I have already filed a 2016 return and  
\_\_\_\_ used the IRS data retrieval via my 2018-2019 FAFSA; OR  
\_\_\_\_ attached an IRS 2016 Tax Return Transcript
- ☐ I had to amend my 2016 tax return and will therefore submit:  
\_\_\_\_ a signed copy of the 2016 1040X; AND  
\_\_\_\_ an IRS 2016 Tax Return Transcript; AND  
\_\_\_\_ an IRS 2016 Tax Account Transcript.

#### If you did NOT and will NOT file 2016 Federal Taxes, complete this section:

- ☐ I will not and am not required to file a 2016 tax return and my total income from work in 2016 was: \$\_\_\_\_\_. If you had earnings, you must attach your 2016 W-2 form(s) or a 2016 Wage and Income Transcript from the IRS and also complete the chart below:

Source of Income (Employer)	Income Amount Earned in 2016

Attach another sheet of paper if needed (must include student name, ID number, and student signature).

### Parent(s) Filing Status (for the parents listed on the reverse)

#### If your parent(s) filed 2016 Federal Taxes, complete this section:

- ☐ My parent(s) have already filed their 2016 return and  
\_\_\_\_ used the IRS data retrieval via my 2018-2019 FAFSA; OR  
\_\_\_\_ attached an IRS 2016 Tax Return Transcript.
- ☐ My parent(s) had to amend their 2016 tax return and will therefore submit:  
\_\_\_\_ a signed copy of their 2016 1040X form; AND  
\_\_\_\_ their IRS 2016 Tax Return Transcript; AND  
\_\_\_\_ their IRS 2016 Tax Account Transcript.

#### If your parent(s) did NOT and will NOT file 2016 Federal Taxes, complete this section:

- ☐ My parent(s) will not and was not required to file a 2016 tax return and will therefore submit:  
\_\_\_\_ Parent 1/Parent 2's IRS 2016 Verification of Non-Filing confirmation from the IRS (dated on or after October 1, 2017)  
In 2016, parent 1 earned \$\_\_\_\_\_ from work, and parent 2 earned \$\_\_\_\_\_ from work. If your parents had earnings, you must attach your parent's 2016 W-2 form(s) OR a 2016 Wage and Income Transcript from the IRS for each parent who had earnings in 2016 and complete the chart below:

Parent name	Source of Income (Employer)	Income Amount Earned in 2016

Attach another sheet of paper if needed (must include student name, ID number, and student and parent signatures).

### STATEMENT OF CERTIFICATION

I certify that all of the information reported on this worksheet is complete and correct. *The student and one parent (from the household listed on the reverse) must sign and date.* **WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.**

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Frederick Community College prohibits discrimination against any person on the basis of age, ancestry, citizenship status, color, creed, ethnicity, gender identity and expression, genetic information, marital status, mental or physical disability, national origin, race, religious affiliation, sex, sexual orientation, or veteran status in its activities, admissions, educational programs, and employment.