

2018-2019 Dependent- Aggregate Verification Worksheet

Your 2018-2019 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 worksheet and with any other required documents. If there are any differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this verification worksheet, attach any required documents and submit to your financial aid administrator at your school. We may ask for additional information. If you have any questions, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

INSTRUCTIONS: Complete all sections of this form, sign and return to Mitchell College

437 Pequot Avenue New London, CT 06320 Phone: 800-443-2811 Fax: 860-701-5090

Section 1: STUDENT'S INFORMATION:

Last Name	First Name	M.I.	Social Security Number
Address			Date of Birth
City	State	Zip Code	Student's Cell Phone Number (include area code)
Student's Home Phone Number (Include area code)			Student's E-mail Address

Section 2: HOUSEHOLD MEMBERS ARE THE PEOPLE IN YOUR PARENT(S)' HOUSEHOLD. Include:

- The student
- The parent(s) (including a stepparent) even if the student doesn't live with the parent(s).
- The parent(s)' other children, **IF**
 - The parent(s) will provide more than half of their support from July 1, 2018 through June 30, 2019, **OR**
 - The other children would be required to provide parental information if they were completing the FAFSA for 2018-2019.

Include children who meet either of these standards, even if they do not live with the parent(s).
- Other people if they **NOW** live with the parent(s) **AND** the parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2019.

INSTRUCTIONS: Write the names, ages and relationships of all household members in spaces below. Also, include the name of the college for any household member, excluding the parent(s), who will be enrolled, at least half time in a degree, diploma or certificate program at a postsecondary educational institution any time between July 1, 2018 and June 30, 2019. If more space is needed, attach a separate piece of paper with the student's name at the top.

FULL NAME	AGE	RELATIONSHIP TO THE STUDENT	COLLEGE	WILL BE ENROLLED AT LEAST HALF TIME
Missy Jones (example)	20 (example)	Sister (example)	Central University(example)	Yes (example)
		Self		

Section 3: NON-TAX RETURN FILERS (Student and Parent(s) listed in the household that did not and won't file a federal tax return)

Instructions:

- 1) Complete this section **and**
- 2) Parent(s) must submit documentation from the IRS, dated after October 1, 2017 that indicates a 2016 IRS income tax return was not filed with the IRS (To order a "Verification of Non-Filing" complete IRS 4506-T form, check Box 7 and mail to the appropriate IRS office)

A. Please check below those individuals in the parent(s)' household who were not employed and had no income earned from work in 2016:

Student _____ Parent #1 _____ and Parent #2 _____ (if applicable)

B. Please check below those individuals in the parent(s)' household who were employed in 2016 and did not file and are not required to file a 2016 federal tax return and complete chart below.

Student _____ Parent #1 _____ and Parent #2 _____ (if applicable)

INSTRUCTIONS FOR NON-TAX FILERS WHO WERE EMPLOYED: List below the employer(s), the amount earned from each employer in 2016 and attach a copy of the 2016 W-2s. If the W-2 is not attached, you must state the reason it is not attached. List every employer even if the employer did not issue a W-2 form. If more space is needed, attach a separate piece of paper.

NAME OF STUDENT OR PARENT	EMPLOYER'S NAME	ANNUAL AMOUNT EARNED IN 2016	W-2 ATTACHED? If No, give reason
Missy Jones (example)	Jim's Auto shop (example)	\$2,100 (example)	Yes (example)

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

Section 4: CERTIFICATION 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.***

Student's Signature (Required)

Date

Parent's Signature (Required)

Date

INSTRUCTIONS:

- The student must appear in person at Mitchell College to complete section 5.
 - If the student cannot appear in person at Mitchell College at the time of this request, SKIP Section 5 and complete Section 6 before a Notary.
-

Section 5: IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE- (to be signed at Mitchell College)

A. The student must appear in person at Mitchell College to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport.

Mitchell College will maintain a copy of the student’s photo ID that is annotated with the date it was received and reviewed and the name of the official at Mitchell College authorized to collect the student’s ID.

Mitchell College Official (Print Name)

Date

B. In addition, the student must sign, in the presence of the Mitchell College official, the Statement of Educational Purpose 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 Mitchell College for 2018-2019.

(Print Student’s Name)

Student’s Signature

Date

Student ID

Section 6: IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE- (to be signed with a Notary)

A. If the student is unable to appear in person at Mitchell College to verify his or her identity, the student must provide to Mitchell College:

1. A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below or that is presented to a notary, such as, but not limited to a driver's license, other state-issued ID or passport; **AND**
2. The **original** Statement of Educational Purpose, which is provided below, **must be notarized.**

Statement of Educational Purpose

B. In addition, the student must sign, in the presence of a Notary the following:

I certify that I _____ am the individual signing this *Statement*
(Print Student's Name)
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 Mitchell College for 2018-2019.

Student's Signature Date

Student ID

Notary's Certificate of Acknowledgement

State of _____ City/County of _____

On _____ before me _____
(Date) (Notary's Name)

personally appeared, _____, and proved to me on basis of
(Printed name of the signer)

satisfactory evidence of identification _____ to be the above-
(Type of government-issued photo ID provided)

named person who signed the foregoing instrument.

WITNESS my hand and official seal _____
(Seal) (Notary Signature)

My commission expires on _____
(Date)