2019-2020 Independent - Standard Verification Worksheet

Your 2019-2020 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 and/or your spouse reported on the FAFSA. To verify that you provided correct information the financial aid administrator at your school 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. Please see signature requirements at the end of the form, attach any required documents and submit to your financial aid administrator at your school. 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 Financial Aid Office 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.	Date of Birth		
Address			City	State	Zip Code
Student's Home Phone Number (Include area code)			Student's Cell Phone I	Number (include area code)	

Section 2: HOUSEHOLD MEMBERS ARE THE PEOPLE IN THE <u>STUDENT'S</u> HOUSEHOLD. Include:

- The student
- The student's spouse, if the student is married.
- The student's or spouse's children, if any, if the student or spouse will provide more than half of the children's support from July 1, 2019 through June 30, 2020, even if they don't live with the student.
- Other people if they <u>NOW</u> 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 their support through June 30, 2020.

INSTRUCTIONS: Write the names, ages and relationships of <u>all household members</u> in spaces below. Also, include the name of the college for any household member, who will be enrolled, <u>at least half time</u> in a degree, diploma or certificate program at a postsecondary educational institution any time between July 1, 2019 and June 30, 2020. If more space is needed, attach a separate piece of paper with the student's name at the top.

FULL NAME	AGE	RELATIONSHIP	COLLEGE	WILL BE ENROLLED AT LEAST HALF TIME
Missy Jones (example)	20 (example)	Son (example)	Central University (example)	Yes (example)
		Self		
		_		

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

Instructions:

1) Complete this section and

Spouse's Signature (optional)

2) Submit documentation from the IRS, dated after October 1, 2018 that indicates a 2017 IRS income tax

	not filed with the II nail to the appropri	,	ication of Non-Fi	ling'	' complete IRS 4506-T form, check	
	ck below those om work in 20		were not en	npl	oyed and <u>had no income</u>	
	Student	Spouse	(if applicab	ole)		
			-	_	d in 2017 and did not file complete chart below.	
	Student	Spouse	(if applicab	le)		
each employer in 2017	and attach a copy of	the 2017 W-2s. If the	W-2 is not attache	ed, y	loyer(s), the amount earned from ou <u>must</u> state the reason it is not ce is needed, attach a separate piece	
NAME OF STUDENT OR SPOUSE	EMPLOYER'S	EMPLOYER'S NAME		UNT	W-2 ATTACHED? If No, give reason	
Missy Jones (example)	Jim's Auto sh	op (example)	\$2,100 (examp		Yes (example)	
Section 4: <u>CERTIFICATION AND SIGNATURES:</u>			KF/'	WARNING: If you purposely give false or misleading information you may be fined, sent to prison or both.		
Each person	signing below cert	ifies that all the info	rmation reported	d is o	complete and correct.	
Student's Signatur	re (Required)					
	,		Date			

Date