2019-2020 Dependent - 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 parents 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	e Number (Include area code)		Student's Cell Phone N	umber (include area code	······································

Section 2: HOUSEHOLD MEMBERS ARE THE PEOPLE IN YOUR <u>PARENT(S)'</u> 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, <u>IF</u>
 - The parent(s) will provide more than half of their support from July 1, 2019 through June 30, 2020, OR
 - > The other children would be required to provide parental information if they were completing the FAFSA for 2019-2020.

Include children who meet either of these standards, even if a child does not live with the parent(s).

Other people if they <u>NOW</u> live with the parent(s) <u>AND</u> the parent(s) provide 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, 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, excluding the parent(s), 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 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: <u>NON-TAX RETURN FILERS</u> (Student and Parent(s) listed in the household that <u>did not and won't file a federal tax return</u>)

Instructions:

1) Complete this section and

Parent's Signature (Required)

2) Parent(s) must submit documentation from the IRS, dated after October 1, 2018 that indicates a 2017 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)

Student _	Parent #1	and Parent #2	(if applicable)
B. Please check b	elow those individuals in th	e parent(s)' household	who were emplo
	id not file and are <u>not req</u>	uired to file a 2017 fe	deral tax return <u>an</u>
complete char	t below.		
Student	Parent #1	and Parent #2	(if applicable)
_			(appca.a.c)
oyer in 2017 and attach a very employer even if the	AX FILERS WHO WERE EMPLOYED a copy of the 2017 W-2s. If the W-2 is employer did not issue a W-2 form.	s not attached, you <u>must</u> state If more space is needed, attac	the reason it is not attac th a separate piece of pa
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Date