

WHY YOU HAVE RECEIVED THIS FORM

Your application was selected for review in a process called "verification". In this verification process, we will be comparing information from your FAFSA with copies of your, your spouse's (if married), or your parents' (if you are dependent) 2015 federal tax return transcripts, and with W-2 forms or other financial documents. Federal regulations require us to collect this information before disbursing federal aid. If there are differences between your FAFSA and the verification documents, we will make the corrections and send the required changes electronically to the federal student aid processor to have your information reprocessed.

STUDENT INFORMATION

Last Name: _____ First Name: _____ M. I. _____

Social Security #: _____ Date of Birth: _____

FAMILY INFORMATION

List other people as part of your household only if they now live with you (IF INDEPENDENT) or your parents (IF DEPENDENT) AND you or your parents provide more than half of their support AND will continue to provide more than half of their support from July 1, 2016 through June 30, 2017. Attach a separate sheet if necessary.

FULL NAME	AGE	RELATIONSHIP	College (if attending at least half-time)
		Self	MMC

Tax Return Transcript & Income Information

To request an official 2015 Tax Return Transcript from the IRS, you may call 1-800-908-9946 or request a transcript online at www.irs.gov

Student

- Check here if you are completing the IRS data match on www.FAFSA.gov AND W-2's.
- Check here if you are attaching a signed copy of your IRS Tax Return Transcript AND W-2's.
- Check here if you did not file, will not file and are not required to file a 2015 U.S. Income Tax Return. Attach copies of a W-2 from each employer.

Parent (Dependent Students Only)

- Check here if you are completing the IRS data match on www.FAFSA.gov AND W-2's.
- Check here if you are attaching a signed copy of your IRS Tax Return Transcript AND W-2's.
- Check here if you did not file, will not file, and are not required to file a 2015 U.S. Income Tax Return. Attach copies of a W-2 from each employer.

Amount received & Employer: _____

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Child Support Paid

If you (or your parent(s) if dependent) paid child support in 2015 please complete the following information:

Child Support Recipient: _____ Name of Child(ren) _____

2015 Amount Paid: _____ Signature of Person Paying Support: _____

Food Stamps (SNAP)

If you (or your parent(s) if dependent) received food stamps in 2014 and/or 2015 please attach a copy of your Electronic Benefit Transfer (EBT) card.

Sign This Worksheet

By signing this worksheet, I (we) certify that all of the information to qualify for federal financial aid is complete and correct. I understand that giving false or misleading information on this worksheet can result in a fine, jail sentence, or both.

Student Signature

Date

Parent Signature (Dependent Students)

Date