

Palomar College Financial Aid 2009-2010 Verification Worksheet, Independent

You have been selected for a process called *Verification*. Our office is required to make sure the information you provided on your 2009-2010 FAFSA is accurate.

What you should do:

1. Fill out all sections of this form. If an item does not apply, enter "N/A" or 0 (zero)
2. Submit a signed copy of federal tax returns with (applicable business/investment schedules) and/or other financial documents along with this completed form to the Financial Aid office.

Household Information: Complete the information below

Independent Students Include:

- Yourself
- Your spouse
- Your dependent children
- Other people only if
 - ✓ They live with you **and** will continue to do so through June 30, 2010
 - ✓ You provide more than half their financial support (*proof may be required*)

College:

- To be a College Student, the household member must
- Enroll in at least six units during 2009-2010
 - Work toward a degree or certificate program

List the College Below

Full Name	Age	Relationship to Student	College
Student:		Self	Palomar College

2008 Income

Select one of the boxes below. Attach a signed copy of student and spouse's (if applicable) federal income tax returns, related tax return schedules, and/or other income documentation.

Student Income Information

- I **did** file a federal tax return.
I **did not** and am not required to file a federal tax return.

List your employer(s) and any income received in 2008

Employer	Amount (\$)

Spouse's Income Information

- I **did** file a federal tax return.
I **did not** and am not required to file a federal tax return.

List your employer(s) and any income received in 2008

Employer	Amount (\$)

Student Name: last _____ first _____ mi _____ Palomar ID# _____ Social Security# _____

2008 Untaxed Income (not earned from work)

Report benefits paid to or received by each group in the appropriate column.

Student	Report Total Amount Received for 2008:	Spouse
\$	Child support received for all children. Do not include foster care or adoption payments.	\$
\$	Housing, food and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).	\$
\$	Veterans non-educational benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances	\$
\$	Workers Compensation or Disability	\$
\$	Other untaxed income (money received or paid on your behalf) not reported elsewhere on the form.	\$
\$	TOTAL	TOTAL \$
Money and Resources Received-- for Clarification purposes only (will not affect federal aid eligibility)*		
\$	Untaxed Social Security and Supplemental Security Income received for all household members.*	\$
\$	Welfare Benefits including AFDC/TANF and food stamps and Workforce Investment Act educational benefits. *	\$
\$	Combat Pay*	\$

Additional Financial Information

Student	Report Total Amount Received/Paid in 2008:	Spouse
\$	Child support paid because of divorce, separation or legal requirement. <i>Do not include support for children in your household.</i>	\$
\$	Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships	\$
\$	Student grant & scholarship aid reported to the IRS in your adjusted gross income (AGI). Include: AmeriCorps, grant or scholarship portions of fellowships and assistantships.	\$
\$	Taxed combat pay (only the taxable amount included in your adjusted gross income).	\$
\$	Total	Total \$

If you had little or no income, list your expenses and how they were paid (*include the source and amount paid*).

Signatures:

Warning: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail or both.
By signing this worksheet, I/We certify that all the information reported to qualify for federal student aid is complete and correct.

Student Signature

Date

Spouse's Signature (*optional*)

Date

Student Name: last _____ first _____ mi _____ Palomar ID# _____ Social Security# _____