

OFFICE OF STUDENT FINANCIAL ASSISTANCE

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2016–2017 Independent Verification Worksheet (V5)

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states 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 differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid office at Luna Community College. Our office may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

Student's Last Name	First Name	M.I.	SSN or LCC ID
Student's Street Address	(include apt. no.)		Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Home Phone No	umber (include area d	Student's Alternate or Cell Phone Number	

B. Independent Student Family Information

List the people in your household. Include:

Yourself

A. Student's Information

- Your spouse (if married))
- Your children if you or your spouse (if married) will provide more than half of their support from July 1, 2016 through June 30, 2017
- Other people if they now live with you and you or your spouse provides more than half of their support and will continue to provide more than half of their support through June 30, 2017.

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, 2016, and June 30, 2017.

If more space is needed, attach a separate page with the student's name and Social Security Number at the top.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
		Self	LCC	

Note: We may require additional information if we have reason to believe that the information provided is inaccurate.

Stude	ent Name:	LCC ID:		
C. I	ndependent Student's Income to be Verified			
finan	RETURN FILERS- Important Note: The instructions below apply to the stude cial aid office if the student and spouse filed separate IRS income tax returned of the 2015 tax year on December 31, 2015.	•	· · · · · · · · · · · · · · · · · · ·	
verify	uctions: Complete this section if the student and/or spouse <u>filed or will filed</u> income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of the e if more information is needed about using the IRS DRT.			
Chec	k the box that applies:			
	The student and/or spouse has used the IRS DRT in FAFSA on the Web into the student's FAFSA <i>and will submit copies of all 2015 W-2 forms</i> .	to transfer 2015 IRS i	ncome tax return information	
	The student and/or spouse has not yet used the IRS DRT in FAFSA on the income tax return information into the student's FAFSA and will submit			
	The student and/or spouse is unable or chooses not to use the IRS DRT in FAFSA on the Web, and instead <i>will provide the school a 2015 IRS Tax Return Transcript(s) and copies of all 2015 W-2 forms.</i>			
	To obtain a 2015 IRS Tax Return Transcript , go to www.IRS.gov and click by MAIL"; transcripts arrive in 5-10 calendar days. In most cases, for each per requested from the IRS within 2–3 weeks after the 2015 IRS income for filers of 2015 paper IRS income tax returns, the 2015 IRS Tax Return after the 2015 paper IRS income tax return has been received by the IRS.	lectronic filers, a 201 tax return has been a n Transcript may be r	5 IRS Tax Return Transcript may accepted by the IRS. Generally,	
*** lj	f the student and spouse filed separate IRS income tax returns, an IRS Tax	Return Transcripts n	nust be provided for both.***	
	Check here if a 2015 IRS Tax Return Transcript(s) and W-2 forms	are provided.		
	Check here if a 2015 IRS Tax Return Transcript(s) will be provided	l later.		
	Check here if 2015 W-2 forms are provided.			
	RETURN NONFILERS- Complete this section if the student and/or spouse \underline{w} n with the IRS.	vill not file and are no	t required to file a 2015 tax	
Chec	k the box that applies:			
	The student and spouse were not employed and had no income earned f	rom work in 2015.		
	The student and/or spouse was employed in 2015 and has listed below the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is provided. [Provide copies of all 2015 IRS W-2 forms issued to the student by his/her employers]. List every employer even if the employer did not issue an IRS W-2 form.			
	If more space is needed, provide a separate page with the student's name and ID number at the top.			
	Employer's Name	2015 Amount Earned	IRS W-2 Provided?	
	Suzy's Auto Body Shop (example)	\$2,000.00	Yes	

Student Name:		LCC ID:	
D. Child Support Paid			
-		ld paid child support in 2015 for a child	
		he person who paid the child support, t the support was paid, and the total anr	
support that was paid in 2015 for	or each child.		
f more space is needed, provid	e a separate page that includes the	student's name and ID number at the t	op.
Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Amount of Child Support Paid in 2015
	eve that the information regarding	child support paid is not accurate, we n	nay require additional
documentation, such as:			
A copy of the separation	on agreement or divorce decree tha	t shows the amount of child support to	be provided;
 Copies of the child sup 	_	support certifying the amount of child receipts, or similar records of electroni	
made.			
E. Receipt of SNAP Benefits			
Please check a box.			
		shald (listed in Costion D. Judgmandont	Chiedant Francis
Information), received Stamp Program) somet receipt of SNAP benefi	benefits from the Supplemental Nutime during 2014 or 2015. NOTE: If	sehold (listed in Section B. Independent attrition Assistance Program or SNAP (for we have reason to believe that the inforumentation from the agency that issue	rmerly known as the Food formation regarding the
2014 or 2015.			
Information), received		ousehold (listed in <i>Section B. Independe</i> utrition Assistance Program or SNAP (fo	
F. High School Completion S	Status		

Provide <u>one</u> of the following documents that indicate the student's high school completion status when the student will begin college in 2016–2017:

- A copy of the student's high school diploma.
- A copy of the student's final official high school transcript that shows the date when the diploma was awarded.
- A copy of the student's General Educational Development (GED) certificate, an official GED transcript that indicates the student passed the exam, or a state-authorized high school equivalent certificate.
- For students who completed secondary education in a foreign country, a copy of the "secondary school leaving certificate" or other similar document.

Stu	udent Name:				LCC ID: _	
•	An academic transcricted toward a bach	•	he student successfully	completed at lea	st a two-year	program that is acceptable for full
•	For a homeschooled student from a state where state law requires the student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.					
•	credential for homes by the student's pare	school (other than ent or guardian, th	a high school diploma	or its recognized e chool courses the	quivalent), a t student comp	otain a secondary school completion transcript or the equivalent, signed pleted and includes a statement ng.
	A student v	vho is unable to o	btain the documentati	on listed above m	ust contact th	ne financial aid office.
			O.60" -	- TI		
		□ Transcript	Office □ HS Diploma	e Use: □ GED	□ Other	
		Initial				
G.	Identity and statem	ent of Educationa	al Purpose			
	1. Th	e student must sig		ne institutional of int of Educational d at Luna Commu	Purpose	owing:
			to be signe	u ut Luna Commu	mity conege)	
	I certify	that I		am t	ne individual s	signing this
		-	(Print Student's Name) Purpose and that the Fused for educational prints.			attending
	(Name of Postsecondar	y Educational Institution)		101 2010)-2017.
						Office Use:
	(Studer	nt's Signature)		(D	ate)	Initial: Date: ID used:
	(Studer	nt's ID Number)	_			
	□ I am unable	to appear in perso	on at Luna Community	College to verify n	ny identity. (C	omplete Section 2)
		inable to appear i ovide:	n person at Luna Comn	nunity College to	verify his/her	identity the student must
	(a)	A copy of the valid	d government-issued pl	noto identificatior	(ID) that is a	cknowledged in the notary

statement below, such as but not limited to a driver's license, other state-issued ID, or passport; and

(b) The original notarized Statement of Educational Purpose provided below.

Student Name:	LCC ID:

Identity and Statement of Educational Purpose (To Be Signed With Notary)

Statement of Educational Purpose

I certify that I	s Name) am the individual signing this		
Statement of Educational Purp I may receive will only be used	pose and that the Federal student financial assistance of for educational purposes and to pay the cost of attending for 2016-2017.		
(Name of Postsecondary E	ducational Institution)		
(Student's Signature)	(Date)		
(Student's ID Number)			
	Notary's Certificate of Acknowledgement		
State of			
City/County of			
On	before me,,		
personally appeared,	(Notary's name), and provided to me (Printed name of signer)		
(Printed name of signer) on basis of satisfactory evidence of identification			
	(Type of government-issued photo ID provided) n who signed the foregoing instrument.		
WITNESS my hand and official	seal		
(seal)	(Notary simpeture)		
My commission expires on	(Notary signature) (Date)		
H. Certifications and Signatures			
The student whose information was reported or Each person signing below certifies that all of the	n the FAFSA must sign and date. se information reported is complete and correct.		
Student's Signature	 Date		
Spouse's Signature (Optional)	 Date		

WARNING:

If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.