



OFFICE OF STUDENT FINANCIAL ASSISTANCE

366 Luna Drive • Las Vegas, NM 87701

(505) 454-2560 • (800) 588-7232 ext. 1036 • FAX: (505) 454-2539 • EMAIL: [finaid@luna.edu](mailto:finaid@luna.edu)

2016–2017 Independent Verification Worksheet (V6)

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.

A. Student’s Information

Form with fields for Student’s Last Name, First Name, M.I., SSN or LCC ID, Student’s Street Address, Date of Birth, City, State, Zip Code, Email Address, Home Phone Number, and Alternate or Cell Phone Number.

B. Independent Student Family Information

List the people in your household. Include:

- Yourself
• 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 at least half time 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.

Table with 5 columns: Full Name, Age, Relationship, College, Will be Enrolled at Least Half Time. Includes a row with 'Self' and 'LCC'.

Note: We may require additional information if we have reason to believe that the information regarding the household member enrolled in eligible postsecondary educational institution is inaccurate.

**C. Independent Student's Income to be Verified**

**TAX RETURN FILERS- Important Note:** The instructions below apply to the student and spouse, if the student is married. Notify the financial aid office if the student and spouse filed separate IRS income tax returns for 2015 or had a change in marital status after the end of the 2015 tax year on December 31, 2015.

**Instructions:** Complete this section if the **student and/or spouse** *filed or will file* a 2015 IRS income tax return(s). *The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of the FAFSA online application.* Contact the financial aid office if more information is needed about using the IRS DRT.

**Check the box that applies:**

- The student and/or spouse **has used** the IRS DRT in FAFSA on the Web to transfer 2015 IRS income tax return information into the student's FAFSA *and will submit copies of all 2015 W-2 forms.*
- The student and/or spouse **has not yet** used the IRS DRT in FAFSA on the Web, but will use the tool to transfer 2015 IRS income tax return information into the student's FAFSA *and will submit copies of all 2015 W-2 forms.*
- The student and/or spouse **is unable or chooses not to use** the IRS DRT in FAFSA on the Web, and instead *will provide the school a 2015 IRS Tax Return Transcript(s) and copies of all 2015 W-2 forms.*

To obtain a **2015 IRS Tax Return Transcript**, go to [www.irs.gov](http://www.irs.gov) and click on the "Get Tax Transcript". Select "Get Transcript by MAIL"; transcripts arrive in 5-10 calendar days. In most cases, for electronic filers, a **2015 IRS Tax Return Transcript** may be requested from the IRS within 2-3 weeks after the 2015 IRS income tax return has been accepted by the IRS. Generally, for filers of 2015 paper IRS income tax returns, the **2015 IRS Tax Return Transcript** may be requested within 8-11 weeks after the 2015 paper IRS income tax return has been received by the IRS.

**\*\*\* If the student and spouse filed separate IRS income tax returns, an IRS Tax Return Transcripts must 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 later.

\_\_\_\_ Check here if a **2015 W-2 forms** are provided.

**TAX RETURN NONFILERS**-Complete this section if the **student and spouse** *will not file and are not required* to file a 2015 tax return with the IRS.

**Check the box that applies:**

- The student and spouse was not employed and had no income earned from work in 2015.
- The student and/or spouse were 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?
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00</i>	<i>Yes</i>

*Note: We may require you to provide documentation from the IRS that indicates a 2015 IRS income tax return was not filed with the IRS*

Student Name: \_\_\_\_\_

LCC ID: \_\_\_\_\_

**D. Verification of Other Untaxed Income for 2015**

Answer each question below as it applies to the student (and the student’s spouse, if married) whose information is on the FAFSA. If any item does not apply, enter “N/A” for Not Applicable where a response is requested, or enter 0 in an area where an amount is requested.

**To determine the correct annual amount for each item:** If you (or student’s spouse, if married) paid or received the same dollar amount every month in 2015, multiply that amount by the number of months in 2015 you paid or received it. If you did not pay or receive the same amount each month in 2015, add together the amounts you paid or received each month.

If more space is needed, provide a separate page with the student’s name and ID number at the top.

**a. Payments to tax-deferred pension and retirement savings**

List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans (e.g., 401(k) or 403(b) plans), including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12d with codes D, E, F, G, H, and S.

Name of Person Who Made the Payment	Total Amount Paid in 2015

**b. Child support received**

List the actual amount of any child support received in 2015 for the children in your household.

**Do not include** foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.

Name of Adult Who Received the Support	Name of Child For Whom Support Was Received	Amount of Child Support Received in 2015

**c. Housing, food, and other living allowances paid to members of the military, clergy, and others**

Include cash payments and/or the cash value of benefits received.

**Do not include** the value of on-base military housing or the value of a basic military allowance for housing.

Name of Recipient	Type of Benefit Received	Amount of Benefit Received in 2015

**d. Veterans non-education benefits**

List the total amount of veterans non-education benefits received in 2015. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.

**Do not include** federal veterans educational benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, and Post-9/11 GI Bill

Name of Recipient	Type of Veterans Non-education Benefit	Amount of Benefit Received in 2015

Student Name: \_\_\_\_\_

LCC ID: \_\_\_\_\_

**e. Other untaxed income**

List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc.

**Do not include** any items reported or excluded in A – D above. In addition, do not include student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Name of Recipient	Type of Other Untaxed Income	Amount of Other Untaxed Income Received in 2015

**f. Money received or paid on the student's behalf**

List any money received or paid on the student's behalf (e.g., payment of student's bills) and not reported elsewhere on this form. Enter the total amount of cash support the student received in 2015. For example, if someone is paying rent, utility bills, etc., for the student or gives cash, gift cards, etc., include the amount of that person's contributions. Amounts paid on the student's behalf also include any distributions to the student from a 529 plan owned by someone other than the student or the student's parents, such as grandparents, aunts, and uncles of the student.

Purpose: e.g., Cash, Rent, Books	Amount Received in 2015	Source

**g. Additional information:**

So that we can fully understand the student's family's financial situation, please provide below information about any other resources, benefits, and other amounts received by the student and any members of the student's household. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office, and include such things as federal veterans education benefits, military housing, SNAP, TANF, etc.

If more space is needed, provide a separate page with the student's name and ID number at the top.

Name of Recipient	Type of Financial Support	Amount of Financial Support Received in 2015

**h. Comments:**

---

---

---

---

---

Student Name: \_\_\_\_\_

LCC ID: \_\_\_\_\_

### E. Child Support Paid

The student or spouse, who is a member of the student's household paid child support in 2015 for a child **not** listed in Section B. Independent Student Family Information. List below the name of the person who paid the child support, the name of the person to whom the child support was paid, the name of the child for whom the support was paid, and the total annual amount of child support that was paid in 2015 for each child.

If more space is needed, provide a separate page that includes the student's name and ID number at the top.

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

Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation, such as:

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A signed statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks, money order receipts, or similar records of electronic payments having been made.

### F. Receipt of SNAP Benefits

Please check a box.

- The student certifies that a member of the student's household (listed in *Section B. Independent Student Family Information*), received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2014 or 2015. **NOTE: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2014 or 2015.**
- The student certifies that **NO** members of the student's household (listed in *Section B. Independent Student Family Information*), received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2014 or 2015.

### G. Certifications and Signatures

The student whose information was reported on the FAFSA must sign and date.  
Each person signing below certifies that all of the 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.**