

FINANCIAL AID OFFICE

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2018-2019
Verification Worksheet
Independent V1

Please read the entire form, complete ALL sections, attach the requested documentation, sign the form, and return to the Financial Aid Office. By law, Luna Community College has the right to request this information before awarding financial aid. If there are differences between the information submitted and your Free Application for Federal Student aid (FAFSA) the school will make the necessary changes. Incomplete worksheets and documentation will cause delays in processing your financial aid. No determination of aid eligibility can be made until all documents are received and reviewed. Warning: If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.

A. Student's Information	
Student's Name	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 Number (include area code)	Student's Alternate or Cell Phone Number

B. Independent Student Family Information

List the people in *your household*. Include:

- Yourself.
- Your spouse (if married).
- Your children or your spouse's children if you or your spouse will provide more than half of the child's support from July 1, 2018 through June 30, 2019, even if the child does not live with student.
- Other people if they now live with you <u>and</u> you or your spouse will provide more than half of the other person's support, and will continue to provide more than half of their support through June 30, 2019.

Number in College: Include the name of the college for any household member listed, who will be enrolled <u>at least half time</u> in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2018, and June 30, 2019.

Full Name	Age	Relationship	College or University	Will be Enrolled at
				Least Half Time
		Self	Luna Community College	

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

Student Name:		LCC I	LCC ID #:			
C.	STUDENT and/or SPOUSE- 2016 IRS Income Tax Return Info	rmation				
Check the box that applies:						
	The STUDENT and/or SPOUSE has <i>filed or will file</i> a 2016 IRS Income Tax Return. GO TO SECTION D.					
	The STUDENT and/or SPOUSE will not and is not required to f	le a 2016 IRS Income T	ax Return. GO TO S	SECTION E.		
D.	TAX RETURN FILERS- Complete this section if the STUDENT and/or SPOUSE <u>filed or will file</u> a 2016 IRS income tax return(s). best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of the FAFSA online application. Cont the financial aid office if the student and spouse filed separate IRS income tax returns for 2016 or had a change in marital st after December 31, 2016.					
	Check the box that applies:					
	The STUDENT and/or SPOUSE <u>has used or will use</u> the IRS DRT feature while completing the <i>FAFSA on the Web</i> to trans 2016 IRS income tax return information.					
The STUDENT and/or SPOUSE <u>was unable or chooses not to</u> use the IRS DRT feature while completing the Foundation will provide LCC a 2016 IRS Tax Return Transcript.						
	 To obtain a 2016 IRS Tax Return Transcript: Online Request- Go to www.IRS.gov, under the File heading, click on the "Get Your Tax Record". Click "Get Transcript" or "Get Transcript by Mail". Make sure to request the "IRS Tax Return Transcript". An "IRS Tax Account Transcript" will NOT be accepted. Telephone Request- 1-800-908-9946 Paper Request - IRS Form 4506-T must be completed and submitted to the IRS 					
E.	Verification of Non-tax Filer- STUDENT and SPOUSE					
	NON-TAX FILER - Complete this section if the STUDENT <u>will not file and is not required</u> to file a 2016 tax return with the IRS. All non-tax filers <i>MUST</i> submit a "Verification of Nonfiling" from the IRS to the Financial Aid Office.					
Check the box that applies:						
	The STUDENT and/or SPOUSE were not employed and had no income earned from work in 2016. The STUDENT and/or SPOUSE will submit a "Verification of Nonfiling" from the IRS. (IRS 4506-T must be completed and submitted to the IRS)					
	The STUDENT and/or SPOUSE was employed in 2016 and has from each employer in 2016, and whether an IRS W-2 form wadid not issue an IRS W-2 form.					
	Employer's Name	2016 Amount Earned	IRS W-2 Provided?			
	Suzy's Auto Body Shop (example)	\$2,000.00	Yes			

Stu	dent Name:	LCC ID #:				
F.	Receipt of other Federal Benefits					
	The STUDENT certifies that a member of the household (listed in Section B. Independent Student Family Information), receive the following benefits sometime during 2016-2017:					
	Medicaid or Supplemental Security Incom	ne				
	Supplemental Nutrition Assistance Program (SNAP)					
	Free or Reduced Price School Lunch					
	Temporary Assistance for Needy Families (TANF)					
	Special Supplemental Nutrition Program	for Women, Infants, and Children (WIC)				
G.	Certifications and Signatures Each person signing below certifies that all of the information reported is complete and correct.					
	Printed Student's Name	LCC ID #				
	Student's Signature (Required)	Date				
	Spouse's Signature (Optional)	 Date				

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