



Beaufort County Community College

P.O. Box 1069 Washington, NC 27889

2012-13 Verification Worksheet

DEPENDENT

Your application was selected for review in a process called "verification." In this process, we will compare the information reported on your Free Application For Federal Student Aid (FAFSA) with the information provided on this worksheet and with any other required documents. By law, we have the right to ask you for this information before awarding Federal aid. If there are differences between your FAFSA and the documentation you provide, corrections may need to be submitted to the federal processor. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit this form and the documents to the Financial Aid Office. Contact us at (252) 940-6222 if you have questions about completing this worksheet.

A. Student Information

Name	Social Security #	Phone #
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B. Family Information

List the people in your parents' household. Include:

- (a) Yourself and your parent(s) (including stepparent), even if you don't live with your parent(s).
- (b) Your parents' other children, even if they don't live with your parent(s), if your parents will provide more than half of their support from July 1, 2012 through June 30, 2013, **or** if the children would be required to provide parental information when applying for Federal student aid.
- (c) Other people **if** they now live with your parent(s), and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2012 through June 30, 2013.

List the names of all household members as defined above. Also include the name of the college for any family member, excluding your parent(s), who will be attending college at least half-time between July 1, 2012 and June 30, 2013, and will be enrolled in a degree, diploma, or certificate program.

Full Name	Age	Relationship	College
<i>Example: Martha Jones</i>	24	Wife	City University
		Self (Student)	

C. Income Information

TAX RETURN FILERS (Important Note: If you and/or your parent(s) filed or will file an amended 2011 IRS tax return, contact the financial aid office before completing this section of the form.)

- If you and your parent(s) **did not use the IRS Tax Retrieval** process when completing your FAFSA **or if you made changes to the income information on your FAFSA** after the IRS Retrieval, call the IRS at 1-800-908-9946 to obtain a 2011 Tax Return Transcript. .
- If you and your parent(s) **used the IRS Tax Retrieval** process and **did not make any changes** to that information, a tax transcript is not necessary.

TAX RETURN NONFILERS

- If you and/or your parent(s) **did not file and are not required to file a 2011 Federal tax return**, check the applicable box(es) below. List the employers and any income received in 2011. Attach all income earning statements (W-2s, 1099s, etc.) received for 2011. Applicants with no taxable income, no earned income or no untaxed income reported will be required to submit a "Low Income Verification Form" showing how living expenses were met.

Student

Father/Stepfather

Mother/Stepmother

Name of Employer	Student Amount	Parent (s) Amount (s)

D. Additional Financial Information

Complete the table below. Enter zeros if no funds were received or paid.

Student	Calendar Year 2011	Parent(s) (Step-parent)
\$	Grant and Scholarship aid reported to the IRS in your adjusted gross income. Includes AmeriCorps benefits, Federal College Work-Study, as well as grant and scholarship portions reported on IRS Form 1040	\$
\$	Child Support PAID because of divorce or separation or as a result of a legal requirement. You must supply a statement from the payee of the child support indicating the annual amount of support and the names of the children for whom the funds are being paid. This statement should be signed by both the payer and the BCCC student. Don't include the amount paid for children listed in your household on the front of this form.	\$
	Child support RECEIVED for all children. Don't include foster care or adoption payments List name of child: _____ _____ _____	\$
\$	Money received or paid on your behalf (e.g., bills), not reported elsewhere on this form.	\$
\$	Veterans' non-education benefits, such as Disability, Death Pension or Dependency & Indemnity Compensation (DIC), VA Educational Work-Study Allowances.	\$
\$	Any other untaxed income or benefits, not reported elsewhere, such as workers' compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, Refugee Assistance, etc. Don't include student aid, WIA benefits, or benefits from flexible spending arrangements, e.g., cafeteria plans.	\$
\$	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).	\$

D. Signatures

By signing this worksheet, I (we) certify that all information reported on this worksheet is complete and correct. **Warning:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Parent's Signature

Date