

Office of Financial Aid &

Student Campus Employment

PO Box 5049, Greeneville, TN 37743

1.800.729.0256 ext. 5377; Fax: 615.250.4968

Email: [financialaid@tusculum.edu](mailto:financialaid@tusculum.edu)

**2016-2017 Dependent**

**Verification Worksheet (V4)**

|  |
| --- |
| Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called Verification. The school will compare information from your FAFSA with 2015 Federal IRS Tax data, this form, and any other requested documents. If there are any differences between your FAFSA information and your documents Tusculum College may make or ask you to make corrections. If the corrections lend to changes in your aid eligibility a revised award letter will be sent. Any corrections made will generate an updated Student Aid Report (SAR).  You and at least one parent must complete, sign and submit this worksheet along with any required documents to the Tusculum College Office of Financial Aid. After reviewing your file you may be asked for additional information. The law says that we have the right to ask you for this information before disbursing Federal Student Aid.  ***SUBMISSION DEADLINE: June 1, 2016 Verification paperwork received after this deadline may cause a delay in the processing of funds to your***  ***student account.***  If you have questions about this process, please contact the Office of Financial Aid as soon as possible to prevent delays. |

1. **Dependent Student’s Information**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Last Name Student’s First Name Student’s M.I. Student’s Social Security Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Street Address (include apt. no.) School Assigned ID Number (if known)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip Code Student’s Date of Birth

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Email Address Student’s Home or Cell Phone Number

1. **Verification of Child Support Paid in 2015**

Complete this section if the student and/or parent **paid** child support in 2015.

Please indicate below the name of the persons who paid the child support, to whom the child support was paid, the names and ages of the children for whom child support was paid, and the total **annual** amount of child support paid in 2015 per child. *If you need more space, attach a separate page that includes the student’s name and Social Security 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 | Age | Amount of Child Support Paid in 2015 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total Amount of Child Support Paid |  |  |  | $ |

1. **SNAP (Supplemental Nutrition Assistance Program – formerly known as food stamps) Benefits Confirmation**

Check the response that applies: Did your parents or anyone in their household receive SNAP Benefits in 2014 or 2015?

🞏 Yes 🞏 No

As a dependent student, people in your parent(s)’ household, include:

* Yourself.
* Your biological or adoptive parent(s) (including step-parent) regardless of marital status in they live together in the same household, even if you do not live with your parents. In the case of divorce, include the parent from which more of your financial support was provided (even if you do not live with them)
* (cont’d) Your parent(s)’ other children, even if they do not live with your parent(s), **if**:

a) Your parents will provide more than half of their support through June 30, 2017 **or**,

b) The children would be required to provide parental information when applying for Federal Student Aid.

* Other people if they now live with your parent(s) and your parent(s) **provide more than half of their support** and will continue to provide more than half of their support through June 30, 2017 (exclude foster children).

**Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **High School Completion Status**

Please check the document you will submit to verify 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 State certificate or transcript received by a student after the student passed a state- authorized examination(GED test, HiSet, TASC, or other state-authorized exam) that the state recognizes as the equivalent of a high school diploma
  + For students who completed secondary education in a foreign country, a copy of the “secondary school leaving certificate” or other similar document
  + An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit toward a bachelor’s degree
  + If State law requires a homeschooled student to obtain a secondary credential for home school (other than a high school diploma or its recognized equivalent), a copy of that credential
  + If State law does not require a homeschooled student to obtain a secondary school completion credential for home school (other than a high school diploma or its recognized equivalent), a transcript or the equivalent, signed by the student’s parent or guardian, that lists the secondary school courses the student completed and documents the successful completion of a secondary school education in a home school setting

***If the student is unable to obtain the documentation listed above, he or she must contact the Office of Financial Aid.***

If you have already submitted this documentation or plan to submit to Tusculum College, please indicate which office

it was or will be submitted to and an approximate date:

* Admission Office. Sent (date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OR Will send (date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Registrar’s Office. Sent (date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OR Will send (date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Other Office:\_\_\_\_\_\_\_\_\_\_\_ Sent (date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ OR Will send (date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Certification and Signatures** (the student and one parent must sign and date).

Each person signing this worksheet certifies that all of the information reported on it is complete and correct.

The student and one parent must sign and date.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**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

***Submit this worksheet to the Tusculum College Office of Financial Aid. You should make a copy of this worksheet for your records.***

Note: If we have reason to believe that any information on this form is inaccurate we may require supplemental documentation.

**\*Please continue to page 3 to complete Section F.**

**Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Identity and Statement of Educational Purpose**

You must verify your identity and sign a statement of Educational Purpose. There are two options for completing this section:

**Option 1:** Appear in person at Tusculum College (main campus or any site locations) and present an

unexpired valid government-issued photo identification.

**Option 2:** If unable to appear in person you must provide an original notarized statement (see reverse side).

**OPTION 1 (appear in person)**

In order to verify your identity, present an unexpired valid government-issued photo identification (ID), such as, but not limited to**:**

* + A driver’s license
  + Other state-issued ID
  + Passport

*Tusculum College will maintain a copy of your photo ID that is annotated with the date it was received and the name of the official at the institution authorized to validate your ID.*

**Statement of Educational Purpose**

**You must sign in the presence of a Tusculum College Official:**

I certify that I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am the individual signing this Statement of

(Print Student’s Name)

Educational Purpose and that the Federal student financial assistance I may receive will only be used for

educational purposes and to pay the cost of attending Tusculum College for 2016-2017.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s ID Number

\*\*\*FOR INTERNAL USE ONLY\*\*\*

Tusculum College Staff ID Verification: Verified by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Unexpired Valid Government-issued photo ID used to verify identity:

\_\_\_\_ Driver’s License

\_\_\_\_ U.S. Passport

\_\_\_\_ Other Government/State Issued ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of State Issued ID

Type of State Issued ID

**Please submit the original of Section F; copies are not acceptable (for this section only).**

**Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Option 2 (unable to appear in person)**

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

If you, the student, are unable to appear in person at Tusculum College (main campus or site location) to verify your identity, you must provide:

1. A copy of the unexpired **valid** government-issued photo identification (ID) that is acknowledged in the notary statement below, such as, but not limited, to a driver’s license, other state-issued ID, or passport; **and**
2. The original Statement of Educational Purpose provided below, which must be notarized.

**Statement of Educational Purpose**

**(To Be Signed in the Presence of a Notary)**

I certify that I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am the individual signing this Statement of

(Print Student’s Name)

Educational Purpose and that the Federal student financial assistance I may receive will only be used for the

educational purposes and to pay the cost of attending Tusculum College for 2016-2017.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s ID Number

**Notary’s Certificate of Acknowledgement**

State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, before me, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(Date) (Notary’s name)

personally appeared, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and provided to me

(Printed name of signer)

on basis of satisfactory evidence of identification \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

                                                           (Type of unexpired government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

**WITNESS my hand and official seal**

                         (seal)                                            \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary signature

My commission expires on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

**Please submit the original of Section F; copies are not acceptable (for this section only).**