

Financial Aid 2016-2017 TRACKING VERIFICATION FLAG V5

Independent Student Aggregate Verification Group

Your 2016 – 2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. We are required to check the accuracy of the information you provided on the 2016 – 2017 FAFSA. Financial aid award letters will not be issued until we receive this information. If a correction to the FAFSA is required, it will be done electronically by the Financial Aid Coordinator.

DO NOT LEAVE ANY QUESTIONS BLANK. If you have any questions, please contact our office.

Complete this form and return to: Great Plains Technology Center

Financial Aid Office

4500 SW Lee Blvd. Bldg. 100 Room 107

A. Independent Student Information

First Name	Last Name	M.I.	Social Security Number
Address (include apt. #)			Date of Birth
City	State	Zip Code	Phone Number

B. Independent Family Information

List below the people in your household. Include:

- ··Yourself.
- ··Your spouse, if you are married.
- ··Your children, if any, if you will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the child would be required to provide your information if they were completing a FAFSA for 2016–2017. Include children who meet either of these standards, even if they do not live with you.
- ··Other people if they now live with you and you provide 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.

Full Name	Age	Relationship	College	Will be Enrolled at
		_		Lease Half Time?
		SELF		

C.	Independent Student's	(and spouse if married	1) 2015 Income Information

Important - If you are married and you and your spouse filed a separate 2015 tax returns, you must submit tax return transcripts for BOTH you and your spouse.

1. TAX RETURN FILERS – Important Note: If you (or your spouse, if married) filed, or will file, an amended 2015 IRS tax return, you must contact the Financial Aid Office before completing this section. **Intructions:** Complete this section if you filed or will file a 2015 income tax return with the IRS **If you did not file, and are not required to file, a 2015 tax return – complete Question #2**Check the box that applies, only check one: I have used to IRS Data Retrieval Tool in FAFSA on the Web to transfer my (and, if married, my spouse's) 2015 IRS income information into my FAFSA. I have not yet used the IRS Data Retrieval Tool, but I will use it to transfer my (and, if married, my spouse's) 2015 IRS income information into my FAFSA once I have filed my 2015 IRS tax return. I am **unable or choose not to** use the IRS Data Retrieval Tool in FAFSA on the Web, and I will submit a 2015 IRS tax return transcript (s) – photocopies of your 1040 income tax return are not acceptable. To obtain an IRS tax return transcript, go to www.IRS.gov and click on the "Order a Return or Account Transcript" link, or call 1-800-908-9946. Make sure to request the "IRS tax return transcript" and not the "IRS tax account transcript." You will need your Social Security Number, date of birth, and the address on file with the IRS (normally this will be the address used when your 2015 IRS tax return was filed.) Check here if an IRS tax return transcript (s) is attached to this form. Check here is an IRS tax return transcript (s) will be submitted at a later date. Verification

cannot be completed and an award letter will not be issued until the IRS tax return

transcript(s) has been submitted and reviewed.

	Check the box that applies: The student and / or spouse, if marr		
	The student and / or spouse if marr		
	2015.	ried, was not employed and had	no income earned from work in
	The student and / or spouse, if marr Listed below are the names of all er 2 is attached. Attach copies of all 2	mployers, the amount earned from	-
	Employer's Name	2015 Amount Earned	IRS W-2 Attached?
plete tl	ation of Other Untaxed Income this section for you and your spouse. Please If you did not have any source of work or living expenses in 2015. Payments to tax-deferred pension and rearnings) to tax deferred pension and rearningt in the control of	income in 2015, please attach d retirement savings – List any stirement savings plans (e.g., 40)	y payment (direct or withheld from 1(k) or 403(b) plans), including, but
	CD (G. 1 G) WI M I	a the Daymont	nnual Amount Paid in 2015
Nama		the Pavinent 1 A	nnual Amount Paid in 2015
Name o	of Person (Student or Spouse) Who Made		
Name (of Person (Student or Spouse) Who Made		_

Food Stamps:	SNAP Verification
	Did you, or you spouse (if married), receive <u>food stamps</u> or benefits from the Supplemental Nutrition Assistance Program (SNAP) at any time during the 2014 or 2015 calendar years?
Yes No	
Child Support	Paid: Did you, or your spouse (if married), pay child support in 2015? If yes, you must complete the chart below.

Name of Person Who Paid Child Support	Name of Person to Whom Support was Paid	Name of Child for Whom Support was Paid	Amount of Child Support Paid in 2015

Identity and Statement of Educational Purpose

(To Be Signed in the Financial Aid Office)

The student must appear in person at Great Plains Technology Center to verify his or her identity by presenting a valid government—issued photo identification (ID), such as but not limited to a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student's ID.

In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I,	am the individual signing this			
(Print S	(Print Student's Name Clearly)			
	nal Purpose and that the federal stude	·	•	
educational purposes al	nd to pay the cost of attending <u>Great</u>	<u>Plains Technology Center</u> for th	e 2015 -2016 award year.	
			 	
(Student's Signature)		(Date)		
(Student's Social Securit	ty Number)			