



2015-2016 VERIFICATION WORKSHEET

V5

STUDENT'S INFORMATION: *(Please print)*

Last Name	First Name	M.I.	Social Security Number
Address (include apt. no.)			Date of Birth
City	State	Zip Code	Phone Number (include area code)

SECTION A: Student's 2014 Information *(do not leave any answer blank-if not applicable indicate "N/A")*

<p>1. If you (or your spouse) filed or will file a 2014 Federal Income Tax, you must send a copy of your income tax transcript to the Financial Aid Office</p> <p><input type="checkbox"/> I have already submitted a transcript of my income tax 2014, or I used the IRS Data Retrieval on my FAFSA application</p> <p><input type="checkbox"/> I am submitting a copy of my (our) 2014 transcript with this form</p> <p><input type="checkbox"/> I will submit a copy of my (our) 2014 transcript</p> <p><input type="checkbox"/> I did not and will not file a 2014 return.</p> <p><input type="checkbox"/> My spouse did not and will not file a 2014 return.</p>	<p>8. If you (or your spouse) worked in 2014 but were not required to file a 2014 return, list your (or your spouse's) employer and the amount of income you (or your spouse) earned.</p> <table border="1" style="width:100%; margin-top: 10px;"> <thead> <tr> <th style="width:70%">EMPLOYER</th> <th style="width:30%">AMOUNT</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	EMPLOYER	AMOUNT																		
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<p>2. How much of the income reported on your (or your spouse's) 2014 return was from Work-Study earnings? \$.00</p>	<p>9. If you (or your spouse) received any of the following untaxed income and benefits in 2014, how much did you (or your spouse) receive for the FULL year?</p> <table border="1" style="width:100%; margin-top: 5px;"> <tr><td>Social Security</td><td>\$ N/A .00</td></tr> <tr><td>Child Support</td><td>\$.00</td></tr> <tr><td>AFDC/ADC or TANF Benefits</td><td>\$ N/A .00</td></tr> <tr><td>Other Welfare Benefits/SNAP/Food Stamps</td><td>\$ N/A .00</td></tr> <tr><td>Military allowances (BAQ and BAS)</td><td>\$.00</td></tr> <tr><td>Clergy housing and living allowances</td><td>\$.00</td></tr> <tr><td>Other untaxed income and benefits:</td><td> </td></tr> <tr><td>Type: \$.00</td><td> </td></tr> <tr><td>-----</td><td> </td></tr> <tr><td>Type: \$.00</td><td> </td></tr> </table> <p style="text-align: right; margin-top: 5px;"><i>SUBMIT SUPPORTING DOCUMENTATION FROM EACH SOURCE</i></p>	Social Security	\$ N/A .00	Child Support	\$.00	AFDC/ADC or TANF Benefits	\$ N/A .00	Other Welfare Benefits/SNAP/Food Stamps	\$ N/A .00	Military allowances (BAQ and BAS)	\$.00	Clergy housing and living allowances	\$.00	Other untaxed income and benefits:		Type: \$.00		-----		Type: \$.00	
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<p>5. If you (or your spouse) paid child support in 2014, how much did you (or your spouse) pay for the FULL year? \$.00</p>	<p>6. If you had a retirement fund 'rollover' included on your (or your spouse's) 2014 return, how much was the 'rollover'? \$ N/A .00</p>																				
<p>7. Hope and Lifetime Learning Tax Credits from IRS Form 1040-line 50: or 1040A-line 33. \$.00</p>	<p> </p>																				

SECTION B: Family Information

DEPENDENT – Fill in the information about the people whom your parent(s) will support between July 1, 2015 and June 30, 2016. Include yourself, your parent(s) and your parents' dependent children if they will receive more than half of their support from your parent(s) or if they would be required to provide parental information when applying for Federal Student Aid. Include other people only if they live with and received more than half of their support from your parent(s) at the time you completed your application, and will continue to receive this support between July 1, 2015 and June 30, 2016.

INDEPENDENT – Fill in the information about the people you will support between July 1, 2015 and June 30, 2016. Include yourself, your spouse, and your dependent children if they will receive more than half of their support from you. Include other people only if they live with and received more than half of their support from you or your spouse at the time you completed your application, and will continue to receive this support between July 1, 2015 and June 30, 2016.

First Name	Last Name	Age	Relationship to you (Parent, brother/sister, etc.)	If person will attend college half-time or more in 2015-2016 print the name of the college.
			SELF	LSC-PA

Check this box if there are more than five family members. Attach a list of these people, providing the same information as requested above for each person.

SECTION C: Parents 2014 Information (do not leave any answer blank-if not applicable indicate "N/A")

Parental information must be completed if you were required to provide parental information when completing the Free Application for Federal Student Aid (FAFSA)

<p>1. If your parents (father, stepfather, mother or stepmother) filed or will file a 2014 Federal Income Tax transcript, you must submit a signed copy of their transcript to the Financial Aid Office. <u>Please print your full name and ID Number security number on the signed copy.</u></p> <p><input type="checkbox"/> I have already submitted a copy of my parents 2014 transcript, or they have used the IRS Data Retrieval on my FAFSA application</p> <p><input type="checkbox"/> I am submitting my parents 2014 transcript with this form</p> <p><input type="checkbox"/> I will submit a copy of my parent's 2014 transcript</p> <p><input type="checkbox"/> My father (stepfather) did not and will not file a 2014 transcript.</p> <p><input type="checkbox"/> My mother (stepmother) did not and will not file a 2014 transcript.</p>	<p>8. If either of your parents worked in 2014 but were not required to file a 2014 return, list their employer and the amount of income they earned.</p> <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th style="width: 70%;">EMPLOYER</th> <th style="width: 30%;">AMOUNT</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	EMPLOYER	AMOUNT																																										
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SECTION D. High School Completion

- Yes, I have either a high school diploma, GED, completed my homeschooling requirements, or completed a 2 year program that is acceptable for full credit towards a bachelor's degree
- No, I do not have a high school diploma or GED, nor have I completed homeschooling requirements.
If the student is unable to obtain the documentation listed above, he or she must contact the financial aid office.

SECTION E. Identity and Statement of Educational Purpose

Please note that the student must complete either Part 1 or Part 2 below. Part 1 must be signed at the Financial Aid Office. Part 2 must be notarized.

Part 1
The student must appear in person at LSCPA 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 Financial Aid Staff at the institution authorized to collect the student's ID. If the student cannot come to the office in person, then this document must be signed in the presence of a Notary. In addition, the student must sign in the presence of the Financial Aid Staff the following:

Statement of Educational Purpose

I certify that I, _____, am the individual signing this Statement of Educational Purpose and that
 (Printed Student's Name)
 the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending LSCPA for 2015-2016.

_____	_____	_____
ID TYPE	ID Number	EXP Date
_____		_____
Financial Aid Staff		Financial Aid Staff Signature

Part 2 (To be completed only if you cannot turn this document in person)

Must Be Signed in the presence of a Notary

If the student is unable to appear in person at Lamar State College -Port Arthur to verify his or her identity, the student must provide:

(a) A copy of a 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**

(b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I, _____, am the individual signing this

(Printed Student's Name)

Statement of 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 Lamar State College - Port Arthur for 2015-2016.

(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 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 _____

SECTION D: Certification and Signatures

You (spouse signature optional) must sign below certifying the accuracy of the information provided on this form. If you were required to provide parental information, at least one of your parents must also sign below certifying the accuracy of the information provided on this form.

Lamar State College-Port Arthur is an equal opportunity/affirmative action educational institution and employer. I give permission for corrections to be made to the FAFSA by the LSC-PA Financial Aid Office.

I (we) certify that all of the information on this form is completed and correct.

Student's Signature

Date

Father's (Stepfather's) Signature

Date

Spouse's Signature

Date

Mother's (Stepmother's) Signature

Date