

Independent Verification Worksheet

2019-2020

Your application has been selected by the **California Student Aid Commission (CSAC)** for a process called "Verification."

SECTION A. Student Information

Last Name	First Name	Dream Act ID	SMC Student ID Number
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SECTION B. Household Size and Number in College

List the people in your parent(s) household including:

- Yourself, and your spouse (if applicable);
- Your dependent children if you will provide more than half of their support from July 1, 2019 through June 30, 2020;
- Other people only if they now live with you and you currently provide more than half of their support and will continue to provide more than half of their support **through June 30, 2020**. Do not include any people who live with you but support themselves with their own income, even if some household expenses are shared.
- Provide the name of the college for any people in the household who will be attending a college or university at least half-time during the 2019-20 academic year.

Full Name	Age	Relationship to Student	Name of College/University <small>(minimum half-time enrollment)</small>
		<i>Self</i>	<i>Santa Monica College</i>

Attach a sheet if necessary to include additional household members. Include all the information required on the chart.

SECTION C. Student (and spouse) Income Verification

Select ONLY ONE of the following options, and attach required documentation, if applicable.	Student
1. I (we) did not work and had no earned income in 2017.	
2. I (we) worked in 2017 and filed taxes for that calendar year. Documentation Required: Copy of student's (and spouse's) 2017 IRS Tax Return Transcript*	
3. I (we) worked in 2017 but did not file and was (were) not required to file a 2017 Federal Income Tax Return Documentation Required: Copy of student's (and spouse's) W-2 form(s), 1099 form(s), or 2017 IRS Wage and Income Transcript*	
4. I (we) worked in 2017 and are unable to provide a copy of my (our) W-2 for the 2017 year. Documentation Required: Typed, dated, and signed Income Statement that includes ALL of the following information: <ul style="list-style-type: none"> • The source(s) of income (please specify if income was earned in cash) • The amount of income earned from each employment source (please specify if you are self-employed) • The reason the W-2 Form(s) are not available. 	

**Note: The following documents can be requested online at www.irs.gov or by calling 1-800-908-9946
 ■ IRS Tax Return Transcript ■ IRS Wage & Income Transcript ■ IRS Non-filing letter.*

SECTION D. Certification and Signatures

I certify that all the information reported on this form is complete and correct to the best of my knowledge. I understand that if I purposely provide false or misleading information I it may be cause for denial and/or repayment of state financial aid funds.

Student Signature _____ Date: _____

Please sign, scan and email your form to financialaid@smc.edu for faster service, or submit in person at Santa Monica College, Office of Financial Aid & Scholarships.