11VWD

NORTHEASTERN JUNIOR COLLEGE
2010-2011 VERIFICATION WORKSHEET
Dependent

Social Security Number

			–			–				

Student ID Number

S								

Name_____ **E-Mail/Phone**_____

Verification is the process where your school's financial aid office will compare the information on this worksheet with the information you reported on your FAFSA application. **Make certain your (the student's) name and SID or SSN is on every page.**

Student/Parent(s) Information – Complete Below

List below the people your parent(s) will provide support to between July 1, 2010 and June 30, 2011. Include the following:

- **Yourself**, as the student
- **Your Parent(s)**, even if you don't live with your parents. Include step-parent if married to the parent whose income information was provided on FAFSA.
- Your parent(s) **other dependent children**, if your parent(s) will provide more than ½ of their support from 7/1/10-6/30/11.
- **Other people** if they now live with your parents **&** if your parents provide more than ½ of their support **&** if your parents will continue to provide more than ½ of their support from July 1, 2010 - June 30, 2011.

FULL NAME	AGE	RELATIONSHIP TO STUDENT	COLLEGE ATTENDING between July 1, 2010 and June 30, 2011. Must be ½ time & working on an eligible degree or certificate. Exclude parents in college.
Student:		**Self**	**Northeastern Junior College**

Student/Parent(s) 2009 Income You must complete BOTH columns below – Be sure to answer each question!

STUDENT	PARENT(S)
☐ 1. **I have filed** or will file a 2009 federal tax form. Submit a signed copy of tax forms and complete information on the back of this form.	☐ 1. **I have filed** or will file a 2009 federal tax form. Submit a signed copy of tax forms and complete information on the back of this form.
2. I am **not required to file** a 2009 federal tax form. ☐ • List below all employers and any income you received in 2009. • Complete information on the back of this form. • **Submit copies of your W2's**. • If you had no earnings from work, please indicate 'NONE'. _____ Employer $_____ Amount _____ Employer $_____ Amount _____ Employer $_____ Amount _____ Employer $_____ Amount	2. I am **not required to file** a 2009 federal tax form. ☐ • List below all employers and any income you received in 2009. • Complete information on the back of this form • **Submit copies of your W2's**. • If you had no earnings from work, please indicate 'NONE'. _____ Employer $_____ Amount _____ Employer $_____ Amount _____ Employer $_____ Amount _____ Employer $_____ Amount

100 College Avenue, Sterling, CO 80751 (970) 521-6800 office (970) 521-6801 fax

2010-2011 Verification Worksheet- Dependent (page 2)

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Name:_____ **SID/SSN**_____

Student	*2009 Additional Financial Information*	Parent(s)
$	a. **Education credits** (Hope and Lifetime Learning tax credits) from IRS Form 1040 line 49 or 1040A line 31.	$
$	b. **Child support paid** because of divorce or separation or as a result of a legal requirement. Do not include support for children in your (or your parents') household, as reported in question 94 (or question 735 for your parents')	$
$	c. Taxable earnings from **need-based employment** programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	$
$	d. Grant and scholarship aid **reported to the IRS** in the adjusted gross income (AGI). Includes AmeriCorps benefits (awards, living allowances, and interest accrual payments), as well as grant or scholarship portions of fellowships and assistantships.	$
$	e. **Combat pay** or special combat pay. Only enter the amount that was taxable and included in the adjusted gross income. Do not enter untaxed combat pay reported on the W-2 (Box 12 Code Q).	$
$	f. Earnings from work under a **cooperative education program** offered by a college. This is a program that the college may offer when you are able to receive income AND receiving college credit for a class. This is not work study. NJC does not offer this.	
$	**TOTAL**	**$**

Student	*2009 Untaxed Income*	Parent(s)
$	a. Payments to **tax-deferred pension and savings plans** (paid directly or withheld from earnings), including, but not limited to, amounts reported on the **W-2 forms in Boxes 12a through 12d, codes D, E, F, G, H, and S**.	$
$	b. IRA deductions and payments to **self-employed SEP**, SIMPLE, and Keogh and other qualified plans form IRS Form **1040—total of lines 28 + 32 or 1040A—line 17**.	$
$	c. **Child support** you **received** for all children. Don't include foster care or adoption payments.	$
$	d. Tax exempt **interest income** from IRS Form **1040—line 8b or 1040A—line 8b**	$
$	e. Untaxed portions of **IRA distributions** from IRS Form 1040—lines **(15a minus 15b)** or 1040A—lines **(11 a minus 11 b)**. Exclude rollovers. If negative, enter a zero here.	$
$	f. Untaxed portions of **pensions** from IRS Form **1040—lines (16a minus 16b)** or **1040A—lines (12a minus 12b)**. Exclude rollovers. If negative, enter a zero here.	$
$	g. **Housing, food, and other living allowances paid to members of the military (BAS)**, clergy, and others (including cash payments and cash value of benefits). **Don't include** the value of on-base military housing or the value of a basic military allowance for housing.	$
$	h. **Veterans' non-education** (ex. Chapter 30) benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.	$
$	i. . **Other untaxed income** not reported, such as workers' compensation, disability, etc. **Don't include** student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, on-base military housing or a military housing allowance, combat pay (if you are not a tax filer), benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	$
$	j. **Money received, or paid on your behalf** (e.g., bills), not reported elsewhere on this form.	$
$	**TOTAL**	**$**

By signing this worksheet, I certify that all the information reported on both sides of this form is complete and correct.

Student Signature **Date** **Parent Signature** **(only one parent's signature required)** **Date**

WARNING: if you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

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