2019-2020 Independent Verification Worksheet

Student's Name

Student's ID Number

Address

Phone

Number of Household Members: List below the people in the student's household. Include:

Full Name	Age	Relationship	College Attended at least half-time during 2019-2020 school year (if any)
		Self	Indian Hills Community College

• The student's spouse, if the student is married.

Full Name	Age	Relationship	College Attended at least half-time during 2019-2020 school year (if any)

• The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2019, through June 30, 2020, even if a child does not live with the student.

- Other people if they now live with the student and the student or spouse provides more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2020.
- List the college name for any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2019, and June 30, 2020.

Full Name	Age	Relationship	College Attended at least half-time during 2019-2020 school year (if any)
2. Did you attend a college other than IHCC during	r? Yes No		
3. Did you file or will you file a 2017 income tax retu	urn?		Yes No*

3. Did you file or will you file a 2017 income tax return?	
*Submit a 19-20 Student NonTax Filers Form, provide copies of all 2017 IRS W-2 forms issued by employers, and s	Jbmit
an IRS Verification of Nonfiling Letter. Print or download at https://www.irs.gov/individuals/get-transcript	

4. Did your spouse file or will they file a 2017 income tax return?

*Submit a 19-20 Student NonTax Filers Form, provide copies of all 2017 IRS W-2 forms issued by employers, and submit an IRS Verification of Nonfiling Letter. Print or download at https://www.irs.gov/individuals/get-transcript

5. Certifications and Signatures	WARNING: If you purposely give false or
Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was	misleading information, you may be fined, sent to prison, or both.
reported on the FAFSA must sign and date. A hand written signature, not typed, is required.	

Student's Signature	(Required)
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Date

Not Applicable

Yes

No*

Please return this completed form to Indian Hills Community College along with any other requested materials: Fax: 641.683.5741 | Mail: IHCC Financial Aid Office, 525 Grandview Ave, Ottumwa, IA 52501 or bring to One Stop/Bennett Student Services Building

You can check your financial aid document status, print required forms, and view your financial aid award information (once available) on WebAdvisor.

The student.