

2016-2017 V6 – INDEPENDENT STUDENT HOUSEHOLD RESOURCES VERIFICATION

(June 20, 2016 – June 17, 2017)

Last Name	First Name	M.I.	Date of Birth
Mailing Address (Apt #)	City/State	Zip	Phone
Student ID#	CCC Student Email @student.clackamas.edu		Previous/Maiden Name

A. Number of Household Members and Number in College
READ DIRECTIONS BEFORE COMPLETING

INDEPENDENT STUDENT HOUSEHOLD List below the people in the Student's household. Include:	
<ul style="list-style-type: none"> The student (yourself) The student's spouse, if the student is married. The student's or spouse's children, if the student or spouse will provide more than half of their support from July 1, 2016, through June 30, 2017, even if the children do not live with the student. Other people if they now live with the student and the student or spouse provides more than half of their support and will continue to provide more than half of their support through June 30, 2017. 	<ul style="list-style-type: none"> Number in College: Include in the space below information about any household member who is, or will be, enrolled <u>at least half time</u> in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2016, and June 30, 2017, include the name of the college.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time? (Yes or No)
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>	<i>Clackamas Community College</i>	
		<i>Self</i>		

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Fax, e-mail, mail, or return this form in person to:

 Office of Financial Aid and Scholarships · Roger Rook Hall · 19600 Molalla Avenue Oregon City OR 97045
 Phone: 503-594-6100 Fax: 503-722-5864 · e-mail: finaid@clackamas.edu www.clackamas.edu

Student ID # _____

STUDENT TO COMPLETE SECTION B OR C**B. Verification of 2015 IRS Income Tax Return Information for Student Tax Filers**

Important Note: The instructions below apply to the student and spouse (if student is married). Notify the financial aid office if the student had a change in marital status after December 31, 2015.

Instructions: Complete this section if the student and/or spouse filed or will file a 2015 IRS income tax return(s). *The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web at FAFSA.gov.* In most cases, no further documentation is needed to verify 2015 income information that was transferred into the student's FAFSA using the IRS DRT if that information was not changed by the FAFSA filer.

Check the box that applies:

- The student has used the IRS DRT in *FAFSA on the Web* to transfer 2015 IRS income tax return information into the student's FAFSA.
- The student has not yet used the IRS DRT in *FAFSA on the Web*, but will use the tool to transfer 2015 IRS income tax return information into the student's FAFSA once the 2015 IRS income tax return has been filed.
- The student is unable or chooses not to use the IRS DRT in *FAFSA on the Web*, and instead will provide the school with a **2015 IRS Tax Return Transcript(s)**.

A **2015 IRS Tax Return Transcript** may be obtained through:

- Online Request - Go to www.irs.gov, under the Tools heading on the IRS homepage, click "Get a Tax Transcript by Mail." Click "Get Transcript by MAIL." Make sure to request the "IRS Tax Return Transcript" and **NOT** the "IRS Tax Account Transcript."
- Telephone Request - 1-800-908-9946
- Paper Request Form - IRS Form 4506T-EZ or IRS Form 4506-T

In most cases, for electronic tax return filers, 2015 IRS income tax return information is available for the IRS DRT or the IRS Tax Return Transcript within 2–3 weeks after the 2015 electronic IRS income tax return has been accepted by the IRS. Generally, for filers of 2015 paper IRS income tax returns, the 2015 IRS income tax return information is available for the IRS DRT or the IRS Tax Return Transcript within 6–8 weeks after the 2015 paper IRS income tax return has been received by the IRS. Contact the financial aid office if more information is needed about using the IRS DRT or obtaining an IRS Tax Return Transcript.

_____ Check here if a **2015 IRS Tax Return Transcript** is provided.

_____ Check here if a **2015 IRS Tax Return Transcript** will be provided later.

C. Verification of 2015 Income Information for Student Nontax Filers

The instructions and certifications below apply to the student and spouse (if married). Complete this section if the student and spouse will not file and are not required to file a 2015 income tax return with the IRS.

Check the box that applies:

- The student and spouse were not employed and had no income earned from work in 2015.

Fax, e-mail, mail, or return this form in person to:

Office of Financial Aid and Scholarships · Roger Rook Hall · 19600 Molalla Avenue Oregon City OR 97045
Phone: 503-594-6100 Fax: 503-722-5864 · e-mail: finaid@clackamas.edu www.clackamas.edu

Student ID # _____

The student and/or spouse were employed in 2015 and have listed below the names of all employers, the amount earned from each employer in 2015, and whether an IRS W-2 form is provided. [Provide copies of all 2015 IRS W-2 forms issued to the student and spouse by their employers]. List every employer even if the employer did not issue an IRS W-2 form.

If more space is needed, provide a separate page with the student's name and ID number at the top.

Employer's Name	IRS W-2 Provided?	Annual Amount Earned in 2015
<i>(Example) ABC's Auto Body Shop</i>	Yes	\$4,500.00
Total Amount of Income Earned From Work		\$

Note: We may require you to provide documentation from the IRS that indicates a 2015 IRS income tax return was not filed with the IRS.

Verification of 2015 Income Information for Individuals with Unusual Circumstances

Individuals Granted a Filing Extension by the IRS

An individual who is required to file a 2015 IRS income tax return and has been granted a filing extension by the IRS, must provide:

- A copy of IRS Form 4868, "Application for Automatic Extension of Time to File U.S. Individual Income Tax Return," that was filed with the IRS for tax year 2015;
- A copy of the IRS's approval of an extension beyond the automatic six-month extension if the individual requested an additional extension of the filing time for tax year 2015; **and**
- A copy of IRS Form W-2 for each source of employment income received for tax year 2015 and, if self-employed, a signed statement certifying the amount of the individual's Adjusted Gross Income (AGI) and the U.S. income tax paid for tax year 2015.

Individuals Who Filed an Amended IRS Income Tax Return

An individual who filed an amended IRS income tax return for tax year 2015 must provide:

- A **2015 IRS Tax Return Transcript** (that will only include information from the original tax return and does not have to be signed), or any other IRS tax transcript(s) that includes all of the income and tax information required to be verified; **and**
- A signed copy of the 2015 IRS Form 1040X, "Amended U.S. Individual Income Tax Return," that was filed with the IRS.

Individuals Who Were Victims of IRS Tax-Related Identity Theft

An individual who was the victim of IRS tax-related identity theft must provide:

- A Tax Return DataBase View (TRDBV) transcript obtained from the IRS, or any other IRS tax transcript(s) that includes all of the income and tax information required to be verified; **and**
- A statement signed and dated by the tax filer indicating that he or she was a victim of IRS tax-related identity theft and that the IRS is aware of the tax-related identity theft.

Individuals Who Filed Non-IRS Income Tax Returns

An individual who filed or will file a 2015 income tax return with the relevant taxing authority of a U.S. territory, commonwealth, or with a foreign central government must provide:

Fax, e-mail, mail, or return this form in person to:

Office of Financial Aid and Scholarships · Roger Rook Hall · 19600 Molalla Avenue Oregon City OR 97045
 Phone: 503-594-6100 Fax: 503-722-5864 · e-mail: finaid@clackamas.edu www.clackamas.edu

Student ID # _____

- A transcript that was obtained at no cost from the relevant taxing authority of a U.S. territory (Guam, American Samoa, the U.S. Virgin Islands) or commonwealth (Puerto Rico and the Northern Mariana Islands), or a foreign central government, that includes all of the tax filer's income and tax information required to be verified for tax year 2015; **or**
- If a transcript cannot be obtained at no cost from the relevant taxing authority, a signed copy of the 2015 income tax return(s).

D. Child Support Paid
 No member of student's household paid Child Support in 2015

Child Support Paid

If the student and/or spouse, who is a member of the student's household, paid child support in 2015, provide in the space below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names and ages of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2015 for each child.

If more space is needed, provide a separate page that includes the student's name and ID number at the top.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name and Age of Child for Whom Support Was Paid	Annual Amount of Child Support Paid in 2015
Total Amount of Child Support Paid			\$

Note: If we have reason to believe that the information regarding child support paid is inaccurate, we may require additional documentation, such as:

- A signed statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks, money order receipts, or similar records of electronic payments having been made.

E. Receipt of SNAP Benefits

Check the box that applies:

- No one in the student's household received benefits from the Supplemental Nutrition Assistance Program or SNAP in 2014 and/or 2015.
- At least one member of the student's household received benefits from the Supplemental Nutrition Assistance Program or SNAP in 2014 and/or 2015.

Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2014 or 2015.

Fax, e-mail, mail, or return this form in person to:

Office of Financial Aid and Scholarships · Roger Rook Hall · 19600 Molalla Avenue Oregon City OR 97045
 Phone: 503-594-6100 Fax: 503-722-5864 · e-mail: finaid@clackamas.edu www.clackamas.edu

Student ID # _____

F. Other Untaxed Income for 2015

DO NOT LEAVE ANY ITEM BLANK. If any item does not apply, enter "N/A" for Not Applicable where a response is requested, or enter 0 (zero) in an area where an amount is requested.

Answer each question below as it applies to the student **and** the student's spouse, if married.

2015 IRS W-2 forms: Provide copies of all 2015 IRS W-2 forms issued by the employers to the student and the student's spouse, if married.

To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2015, multiply that amount by the number of months in 2015 you paid or received that amount. If you did not pay or receive the same amount each month in 2015, add together the amounts you paid or received each month during 2015.

If more space is needed, provide a separate page with the student's name and ID number at the top.

1. Payments to tax-deferred pension and retirement savings

List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings plans (e.g., 401(k) or 403(b) plans), including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12d with codes D, E, F, G, H, and S.

Name of Person Who Made the Payment	Annual Amount Paid in 2015
Total Payments to Tax-deferred Pension and Retirement Savings	\$

2. Child support received

List the actual amount of any child support received in 2015 for the children in your household.

Do not include foster care payments, adoption payments, or any amount that was court-ordered but not actually paid.

Name of Adult Who Received the Support	Name of Child For Whom Support Was Received	Annual Amount of Child Support Received in 2015
Total Amount of Child Support Received		\$

Fax, e-mail, mail, or return this form in person to:

Office of Financial Aid and Scholarships · Roger Rook Hall · 19600 Molalla Avenue Oregon City OR 97045
 Phone: 503-594-6100 Fax: 503-722-5864 · e-mail: finaid@clackamas.edu www.clackamas.edu

Student ID # _____

3. Housing, food, and other living allowances paid to members of the military, clergy, and others

Include cash payments and/or the cash value of benefits received.

Do not include the value of on-base military housing or the value of a basic military allowance for housing.

Name of Recipient	Type of Benefit Received	Annual Amount of Benefits Received in 2015
Total Amount of Benefits Received		\$

4. Veterans non-education benefits

List the total amount of veterans non-education benefits received in 2015. Include Disability, Death Pension, Dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.

Do not include federal veterans educational benefits such as: Post-9/11 GI Bill, Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits

Name of Recipient	Type of Veterans Non-education Benefit	Annual Amount of Benefits Received in 2015
Total Amount of Benefits Received		\$

5. Other untaxed income

List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability benefits, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc.

Do not include any items reported or excluded in A – D above. In addition, do not include extended foster care benefits, student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Innovation and Opportunity Act (WIOA) educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels.

Name of Recipient	Type of Other Untaxed Income	Annual Amount of Other Untaxed Income Received in 2015
Total Amount of Other Untaxed Income		\$

Fax, e-mail, mail, or return this form in person to:

 Office of Financial Aid and Scholarships · Roger Rook Hall · 19600 Molalla Avenue Oregon City OR 97045
 Phone: 503-594-6100 Fax: 503-722-5864 · e-mail: finaid@clackamas.edu www.clackamas.edu

Student ID # _____

6. Monthly Expenses

Please assign dollar amounts for each living expense below and indicate how these bills were paid. If the living expense was paid on your behalf, please explain how and by whom. Please complete all sections.

(Example: if you lived with a roommate in an apartment with \$700 monthly rent, which your roommate paid, your share of the rent would be \$350. List this amount under "Cost Per Month". You would then indicate that the expense was paid by your roommate.)

DO NOT LEAVE ANY BOXES BLANK.

<u>Monthly Expense</u>	<u>Cost Per Month</u>	<u>Who paid this expense?</u>
Rent / Mortgage		
Food		
Utilities (electricity, heat, telephone, cable TV)		
Medical Expenses (insurance, prescriptions)		
Transportation (car payment, insurance, gas, bus pass)		
Clothing & Essentials		
Daycare		

Fax, e-mail, mail, or return this form in person to:

Office of Financial Aid and Scholarships · Roger Rook Hall · 19600 Molalla Avenue Oregon City OR 97045

Phone: 503-594-6100 Fax: 503-722-5864 · e-mail: finaid@clackamas.edu www.clackamas.edu

Student ID # _____

Certification and Signature

The person signing below certifies that all of the information reported is complete and correct.

WARNING: If you purposely give false or misleading information, you may be fined, sentenced to jail, or both.

Student's Signature_____
Date

Fax, e-mail, mail, or return this form in person to:

Office of Financial Aid and Scholarships · Roger Rook Hall · 19600 Molalla Avenue Oregon City OR 97045

Phone: 503-594-6100 Fax: 503-722-5864 · e-mail: finaid@clackamas.edu www.clackamas.edu