



Truckee Meadows Community College

Financial Aid, Scholarships, Student Employment and Veterans Education Benefits

# V1 INDEPENDENT STANDARD VERIFICATION

## For 2016-2017

**Mailing Address:** 7000 Dandini Blvd., RDMT 315, Reno, NV 89512

Your application was selected by the U.S. Department of Education for a process called "Verification". We will compare the information on your FAFSA with your IRS Tax Return Transcript, and with information collected on this worksheet.

### What You Should Do:

1. Collect your and your spouses' 2015 financial documents (signed Federal Tax Return Transcripts, W-2s, etc.)
2. Complete all sections of this worksheet, including the student and spouse signatures, in blue or black ink only
3. Do not leave any sections or questions on this worksheet blank.
4. Mail, or bring in this completed worksheet, along with your signed tax return transcripts, if applicable, and any other related documents to the TMCC Financial Aid Office.
5. Completed documents must be submitted to the Financial Aid Office in-person or by mail only.
6. TMCC Financial Aid will compare the information on these documents and your FAFSA and make corrections as necessary. If it appears the information in this document is inaccurate or incomplete, we may ask you for additional documentation.
7. Note: If you were unable to use the IRS Tax Data Retrieval function on the FAFSA, or if you used the function but changed the data, you must provide us with a 2015 Tax Return Transcript from the IRS. Tax Return Transcripts may be printed from the IRS website by the tax filer at [www.irs.gov/Individuals/Get-Transcript](http://www.irs.gov/Individuals/Get-Transcript), by calling 1-800-908-9946, or by submitting IRS Form 4506-T and checking box 7. Be sure to order the "Tax Return Transcript" and not the "Tax Account Transcript".

## SECTION 1: STUDENT'S INFORMATION

Last Name		First Name		MI
NSHE ID	Email	Telephone Number	Date of Birth	
Street Address		City	State	Zip Code

## SECTION 2: STUDENT TAX FORMS AND INCOME INFORMATION

<b>Select one of the following. If you check Box B or C, list your employer(s) and report any income earned from working in 2015.</b>	
A1.	<input type="checkbox"/> I/We used the IRS Data Retrieval Tool when completing the FAFSA and have not changed my tax information.
A2.	<input type="checkbox"/> I/We am attaching signed copies of my 2015 IRS Tax Return Transcripts (if you filed an Amended IRS tax return, also include a signed copy of the 2014 IRS Form 1040X, "Amended U.S. Individual Income Tax Return" that was filed with the IRS).
B.	<input type="checkbox"/> I did work but will not file AND am not required to file a 2015 U. S. Income Tax Return. ( <b>Attach copies of all W-2 forms for 2015</b> )
C.	<input type="checkbox"/> I did not work in 2015 AND will not file AND am not required to file a 2015 U.S. Income Tax Return. <i>Note: The TMCC Financial Aid Office may require you to provide documentation from the IRS that indicates a 2015 IRS Income Tax Return was not filed with the IRS.</i>
<b>Employer(s)</b>	
<b>Dollar Amount Earned (from W-2 Form)</b>	

**SECTION 3: SPOUSE'S TAX FORMS AND INCOME INFORMATION**

Select one of the following. If you check Box B or C, list your employer(s) and report any income earned from working in 2015.

A1.  I/we used the IRS Data Retrieval Tool when completing the FAFSA and have not changed my/our tax information.

A2.  I/we are attaching signed copies of my/our 2015 IRS Tax Return Transcript. *Note: If you Amended your taxes and filed a 1040X, "Amended U.S. Individual Tax Return", also include a signed copy of the 1040X Amended Tax Form that was filed with the IRS.*

B.  I did work but will not file AND am not required to file a 2015 U. S. Income Tax Return. (**Attach copies of all W-2 forms received for 2015**)

C.  I did not work in 2015 AND will not file a 2015 U.S. Income Tax Return. *Note: The TMCC Financial Aid Office may require you to provide documentation from the IRS that indicates a 2015 IRS Income Tax Return was not filed with the IRS.*

Employer(s)	Dollar Amount Earned

If you are required to file a 2015 IRS Income Tax Return but have been granted a filing extension by the IRS, provide the following documents:

- 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 IRS Form W-2 for each source of employment received for tax year 2015 and, if self-employed, a signed statement certifying the amount of your Adjusted Gross Income (AGI) and the amount of U.S. income tax paid for tax year 2015.

**SECTION 4: HOUSEHOLD MEMBER INFORMATION**

List the names of all household members. Also, list the college for any household member who will be attending college at least half-time **between July 1, 2016 and June 30, 2017**, and will be enrolled in a degree or certificate program. Attach a separate page, if needed. *Note: If it appears the information in this document is inaccurate, we may ask you for additional documentation.*

Include:

- You and your spouse (if married).
- **AND** your children, if you will provide more than half of their support from **July 1, 2016 through June 30, 2017** even if they don't live with you **OR** the children would be required to provide parental information when applying for Federal Student Aid
- **AND** other people, if they now live with you and you provide more than half of their support and will continue to provide more than half of their support from **July 1, 2016 through June 30, 2017**.

Household Members (attach a separate page if needed)			
Full Name (Example: Mary Smith)	Age (Example: 19)	Relationship (Example: Self)	College Attending in 2016-17 (Example: TMCC)

**SECTION 5: SNAP AND CHILD SUPPORT PAID**

**SNAP General Instructions:** Indicate below if you, your spouse, or a member of your household received benefits from the Supplemental Nutrition Assistance Program (SNAP, formerly known as the Food Stamp Program) during either 2014 and/or 2015. 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.

Did you, your spouse, or a member of your or your household receive Food Stamps in 2014 and/or 2015? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Please complete the following information for the person in your household receiving SNAP benefits:</b>		
Last Name	First Name	MI
Relationship to Student <i>(if you are the one receiving benefits, please indicate "self")</i>		

**Child Support Paid General Instructions:** Indicate below if you or your spouse (if married) paid child support during 2015. Report only amounts paid by a person in your household. List below the names of the persons who paid the child support, the names of the person to whom child support was paid, the names 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 we have reason to believe the information regarding child support paid is inaccurate or conflicts with information reported elsewhere, we may require additional documentation.

Did you (student) pay child support in 2015? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is that child included as a member of your household on your FAFSA? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>If "Yes", please certify the following</b> <i>(attach a separate page if needed)</i>				
Name of Person Who Paid Support	Name of Person to Whom Support Was Paid	Name of Child Receiving Support	Age of Child Receiving Support	Total Amount of Child Support Paid in 2015
Did your spouse pay child support in 2015? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is that child included as a member of your household on your FAFSA? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>If "Yes", please certify the following</b> <i>(attach a separate page if needed)</i>				
Name of Person Who Paid Support	Name of Person to Whom Support Was Paid	Name of Child Receiving Support	Age of Child Receiving Support	Total Amount of Child Support Paid in 2015

**SECTION 6: SIGNATURES AND CERTIFICATION**

By signing this worksheet, I (we) certify that all information reported on this worksheet is complete and correct.	
<i>Note: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both. If it appears the information in this document is inaccurate, we may ask you for additional documentation.</i>	
Student's Signature <i>(required)</i>	Date
Spouse's Signature	Date

**For Office Use Only**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Processed by: \_\_\_\_\_ Date: \_\_\_\_\_