

VERIFICATION WORKSHEET 2008-2009

LAMAR STATE COLLEGE-PORT ARTHUR

APPLICANT'S INFORMATION:

A Member of The Texas State University System

Last Name First Name M.I.

Social Security Number

Address (include apt. no.)

Date of Birth

City State Zip Code

Phone Number (include area code)

SECTION A: Application's 2007 Information (do not leave any answer blank-if not applicable indicate "N/A")

<p>1. If you (or your spouse) filed or will file a 2007 Federal Income Tax Return, you must send a copy of your return to the Financial Aid Office</p> <p><input type="checkbox"/> I have already submitted a copy of my (our) 2007 return</p> <p><input type="checkbox"/> I am submitting a copy of my (our) 2007 return with this form</p> <p><input type="checkbox"/> I will submit a copy of my (our) 2007 return on _____</p> <p><input type="checkbox"/> I did not and will not file a 2007 return.</p> <p><input type="checkbox"/> My spouse did not and will not file a 2007 return.</p>	<p>8. If you (or your spouse) worked in 2007 but were not required to file a 2007 return, list your (or your spouse's) employer and the amount of income you (or your spouse) earned.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #cccccc;"> <th style="text-align: center;">EMPLOYER</th> <th style="text-align: center;">AMOUNT</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	EMPLOYER	AMOUNT																
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<p>2. How much of the income reported on your (or your spouse's) 2007 return was from Work-Study earnings? \$.00</p>	<p>9. If you (or your spouse) received any of the following untaxed income and benefits in 2007, how much did you (or your spouse) receive for the year?</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>Social Security</td><td style="text-align: right;">\$.00</td></tr> <tr><td>Child Support</td><td style="text-align: right;">\$.00</td></tr> <tr><td>AFDC/ADC or TANF Benefits</td><td style="text-align: right;">\$.00</td></tr> <tr><td>Other Welfare Benefits (excluding Food Stamps)</td><td style="text-align: right;">\$.00</td></tr> <tr><td>Military allowances (BAQ and BAS)</td><td style="text-align: right;">\$.00</td></tr> <tr><td>Clergy housing and living allowances</td><td style="text-align: right;">\$.00</td></tr> <tr> <td>Other untaxed income and benefits:</td> <td> </td> </tr> <tr> <td>Type: _____</td> <td style="text-align: right;">\$.00</td> </tr> <tr> <td>Type: _____</td> <td style="text-align: right;">\$.00</td> </tr> </tbody> </table> <p style="text-align: center; margin-top: 5px;"><i>SUBMIT SUPPORTING DOCUMENTATION FROM EACH SOURCE</i></p>	Social Security	\$.00	Child Support	\$.00	AFDC/ADC or TANF Benefits	\$.00	Other Welfare Benefits (excluding Food Stamps)	\$.00	Military allowances (BAQ and BAS)	\$.00	Clergy housing and living allowances	\$.00	Other untaxed income and benefits:		Type: _____	\$.00	Type: _____	\$.00
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<p>7. Hope and Lifetime Learning Tax Credits from IRS Form 1040-line 49; or 1040A-line 31. \$.00</p>																			

SECTION B: Family Information

DEPENDENT – Fill in the information about the people whom your parent(s) will support between July 1, 2008 and June 30, 2009. Include yourself, your parent(s) and your parents' dependent children if they will receive more than half of their support from your parent(s) or if they would be required to provide parental information when applying for Federal Student Aid. Include other people only if they live with and received more than half of their support from your parent(s) at the time you completed your application, and will continue to receive this support between July 1, 2008 and June 30, 2009.

INDEPENDENT – Fill in the information about the people you will support between July 1, 2008 and June 30, 2009. Include yourself, your spouse, and your dependent children if they will receive more than half of their support from you. Include other people only if they live with and received more than half of their support from you or your spouse at the time you completed your application, and will continue to receive this support between July 1, 2008 and June 30, 2009.

First Name	Last Name	Age	Relationship to you (parent, brother/sister, etc.)	If person will attend college half-time or more in 2008-2009 print the name of the college.
			SELF	LSC-PA

☐ Check this box if there are more than five family members. Attach a list of these people, providing the same information as requested above for each person.

SECTION C: Parents 2007 Information (do not leave any answer blank-if not applicable indicate "N/A")

Parental information must be completed if you were required to provide parental information when completing the Free Application for Federal Student Aid (FAFSA)

<p>1. If your parents (father, stepfather, mother or stepmother) filed or will file a 2007 Federal Income Tax Return, you must submit a signed copy of their return to the Financial Aid Office. <u>Please print your full name and social security number on the signed copy.</u></p> <p>Which of the following is true?</p> <p><input type="checkbox"/> I have already submitted a copy of my parents 2007 return</p> <p><input type="checkbox"/> I am submitting my parents 2007 return with this form</p> <p><input type="checkbox"/> I will submit a copy of my parent's 2007 return on _____ (date)</p> <p><input type="checkbox"/> My father (stepfather) did not and will not file a 2007 return.</p> <p><input type="checkbox"/> My mother (stepmother) did not and will not file a 2007 return.</p>	<p>8. If either of your parents worked in 2007 but were not required to file a 2007 return, list their employer and the amount of income they earned.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 70%;">EMPLOYER</th> <th style="width: 30%;">AMOUNT</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	EMPLOYER	AMOUNT																
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SECTION D: Certification and Signatures

You (spouse signature optional) must sign below certifying the accuracy of the information provided on this form. If you were required to provide parental information, at least one of your parents must also sign below certifying the accuracy of the information provided on this form.

Lamar State College-Port Arthur is an equal opportunity/affirmative action educational institution and employer.

I (we) certify that all of the information on this form is completed and correct.

Student's Signature	Date	Father's (Stepfather's) Signature	Date
Spouse's Signature	Date	Mother's (Stepmother's) Signature	Date