2015-16 FINANCIAL AID OFFICE

attached.

copy is attached.

Non-U.S. Tax Return Filers

VERIFICATION WORKSHEET

Your FAFSA was selected for a review process called verification. In the process, the campus will be comparing information from your FAFSA with your Federal tax information, W-2 forms and/or other financial documents. The federal law states that the campus must ask for this information before awarding financial aid. If there are differences between your FAFSA information and your financial documents, corrections will be made to your FAFSA and your information will be reprocessed.

You must complete, sign and submit this worksheet along with any documents requested below no later than 30 days prior to the last date of the

	First Name	M.I.	UH ID Number/Username
Phone Number B. FAMILY INFORMATION			Date of Birth
DEPENDENT STUDENTS: You are consider required to provide your parent's information B, C, D, E, F and G. • yourself, • your parent(s) you live with (including your parents' other children, if (a) your support from July 1, 2015 through June required to provide parental information and • other people if they now live with your than half of their support and will contisupport from July 1, 2015 through June	stepparent), and parents provide more than half of their 30, 2016, or (b) the children would be when applying for Federal student air parents, and your parents provide mor nue to provide more than half of their	, if you were FAFSA. Co • your • your • your • your July • other half	ENT STUDENTS: You are considered an Independent student not required to provide your parent's information on your amplete sections A, B, C, E, F and G. self, spouse, if married, children, if you provide more than half of their support from 1, 2015 through June 30, 2016, and repeople if they now live with you, and you provide more than of their support and will continue to provide more than half of support from July 1, 2015 to June 30, 2016
	ng your parent(s), who will be atte	iding college at leas	tructions above (if applicable). Also write the name of the sthalf-time between July 1, 2015 and June 30, 2016, and
	certificate program. Attach a sepa	ate sheet if more sp	bace is needed.
college for any family member, excluding will be enrolled in a degree, diploma, or Full Name	Age Age	Relationship	College
will be enrolled in a degree, diploma, or		•	
will be enrolled in a degree, diploma, or		Relationship	
will be enrolled in a degree, diploma, or		Relationship	

☐ Student (and spouse) is unable or choose not to use the IRS Data Retrieval Tool in FAFSA. 2014 Federal Tax Return Transcript is

Student completed a 2014 foreign tax return or a tax return with another U.S. territory or one of the Freely Associated States. A signed

IRS information to FAFSA once 2014 Federal Tax Return is filed. (FAO will use IRS information that was transferred)

FINANCIAL AID OFFICE STUDENT NAME:			2015-16 UH ID #/USERNAME:						
	3.	Non-Tax Filers							
		☐ If you (and/or spouse) income earned from work						rn, list below your employer(s) and any enter "0".	
Sou	ırce	(Use the W-2 form or othe	er earnings statemen	t)		201	4 Amount (atta	ch W-2/Wage Statement)	
D.	PA	PARENT(S) TAX FORM AND INCOME INFORMATION (FOR DEPENDENT STUDENTS)							
	1.	1. TAX RETURN FILERS							
		Parent(s) has used the IRS Data Retrieval Tool, or did not use the IRS Data Retrieval Tool, but will use the Tool to transfer IRS information to FAFSA once 2014 Federal Tax Return is filed. (FAO will use IRS information that was transferred)							
	Parent(s) is unable or choose not to use the IRS Data Retrieval Tool in FAFSA. 2014 Federal Tax Return Transcript is attached.								
	2.	Non –U.S. Tax Return I	Filers						
		Parent(s) completed a 2014 foreign tax return with another U.S. Territory or one of the Freely Associated States. A signed copy is attached.							
	3.	Non-Tax Filers							
	☐ If your parent(s) did not file and/or are not required to file a 2014 Federal Income Tax Return, list below your parent(s) employer(s) and any income earned from work in 2014. If your parent(s) had no income earned from work for 2014, enter "0".								
Sou	ırce	(Use the W-2 form or other	er earnings statemen	t)		201	4 Amount (atta	ch W-2/Wage Statement)	
E.	DID SOMEONE IN YOUR HOUSEHOLD (AS REPORTED ON THE FAFSA) RECEIVE BENEFITS FROM THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM OR SNAP (FORMERLY KNOWN AS FOOD STAMPS) ANY TIME DURING 2013 OR 2014?							EMENTAL NUTRITION ASSISTANCE	
	[YES N	О						
F.	DII	O YOU (OR YOUR SPOUSE, IF I	MARRIED) AND/OR YO	OUR PARENT(S) P	AY CHILD SUPPO	ORT IN	2014?	YES NO	
		ves, indicate the name of the al annual amount of the child				l supp	ort was paid, for	whom child support was paid, and the	
		Name of Person to Support wa			d for whom Support as Paid		Amount of Child Support Paid in 2014		
G.		ERTIFICATION AND SIGNAtion and a complete and a		this workshee	et, we certify th	at all	the information	on reported to qualify for federal	
Stu	dent	t (required)		Date			misleading inf	ou purposely give false or or or or this worksheet, you be sentenced to jail, or both.	
Par	ent ((required for dependent st	tudent)	Date		L		, 5- 45	
		T MAIL THIS WORKSHEE	ŕ	ARTMENT OF I	EDUCATION				
						MMUI	NITY COLLEGE C	AMPUS THAT YOU WILL BE ATTENDING:	

Community College	Address	Email	Phone
Hawai'i Community College	200 West Kawili Street * Hilo, HI 96720	hawccfao@hawaii.edu	(808) 934-2712
Honolulu Community College	874 Dillingham Boulevard * Honolulu, HI 96817	honccfao@hawaii.edu	(808) 845-9116
Kapi'olani Community College	4303 Diamond Head Road * Honolulu, HI 96816	kapinfo@hawaii.edu	(808) 734-9555
Kaua'i Community College	3-1901 Kaumuali'i Highway * Lihu'e, HI 96766	kauccfao@hawaii.edu	(808) 245-8360
Leeward Community College	96-045 Ala 'Ike Street * Pearl City, HI 96782	lccfao@hawaii.edu	(808) 455-0606
University of Hawai'i Maui College	310 West Ka'ahumanu Ave * Kahului, HI 96732	mauifa@hawaii.edu	(808) 984-3277
Windward Community College	45-720 Kea'ahala Road * Kāne'ohe, HI 96744	wccfao@hawaii.edu	(808) 235-7449
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