

DEPENDENT STUDENT VERIFICATION WORKSHEET 2021-2022



A. STUDENT INFORMATION

Last Name	First Name	Age/Date of Birth	CCAD ID or Last 4 Digits of SSN
Email Address			Preferred Phone Number

B. PARENT INFORMATION

COMPLETE THE TABLE BELOW.

- **Include** your parent(s) with whom you live (or last lived with)—(include stepparent, if married);
- **Include** you parent(s)' most recent marital status and the date. No date is required for single/unmarried parents.
- **Do not include** a parent that is not living in the household due to separation or divorce.

Full Name	Date of Birth	Relation	Marital Status & Date
		Parent #1	<input type="checkbox"/> Unmarried, both parents together <input type="checkbox"/> Single <input type="checkbox"/> Married ___/___ <small>MM YYYY</small>
		(Step) Parent #2	<input type="checkbox"/> Divorced/Separated/Widowed

C. FAMILY INFORMATION

COMPLETE THE TABLE BELOW.

- **Include** your parents' children (including any unborn children that are expected to be born prior to July 1, 2022) if they will provide more than half of the children's support from July 1, 2021 - June 30, 2022.
- **Include** other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support from July 1, 2021 - June 30, 2022.
- **Do not include** yourself or parent(s) in the boxes below. That information is reported in Section A and B.

Indicate if any below individuals will be enrolled in a degree or certificate program at a college, university, or other post-second-ary institution at least half-time between July 1, 2021 and June 30, 2022. Middle or high school students in college courses such as AP or CCP classes are not considered as "in college".

Full Name	Age/Birth Date	Relation to Student	College Attending 2021-2022

(Attach a separate sheet or list below in margin if you need more room.)

More information needed on the back of this worksheet.

<p>For Office Use Only Total Household Size: _____ Total Number in College: _____</p>
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D. CHILD SUPPORT PAID

If your parent(s) paid child support in 2019, complete the following table. If not, skip to Section E.

Name of Person to Whom Child Support Was Paid	Name of Child for Whom Child Support Was paid	Total Amount of Support Paid in 2019

E. TAX FILING STATUS AND INCOME INFORMATION

COMPLETE BOTH ITEMS, 1) & 2) BELOW. Include information for parent and stepparent (if applicable) when completing Section E.

PARENT(S)

1) Check one of the following:

- My parent(s) filed a 2019 Federal Tax Return.*
Circle: Transcript Enclosed or IRS DRT Used
- My parent(s) were not employed and had no earned income in 2019 and did not file a 2019 Federal Income Tax Return.†
- My parent(s) did not file a 2019 Federal Income Tax Return but did work and/or have earned income and have included W-2(s) and listed income below.†
Parent 1:\$ _____ Parent 2:\$ _____

STUDENT

2) Check one of the following:

- I filed a 2019 Federal Tax Return*
Circle: Transcript Enclosed or IRS DRT Used
- I was not employed and had no earned income in 2019 and did not file a 2019 Federal Income Tax Return.
- I did not file a 2019 Federal Income Tax Return but did work and/or have earned income and have included W-2(s) and listed income below
Student:\$ _____

*All tax filers must submit a 2019 Federal Tax Return Transcript or use the IRS Date Retrieval Tool within the FAFSA.

- Federal Tax Return Transcripts are available on irs.gov/individuals/get-transcript or by calling 1-800-908-9946.

†Any parent who did not file a 2019 federal tax return must submit a Verification of Non-Filing Letter from the IRS.

- Verification of Non-Filing Letters are available by completing an IRS Form 4506-T and submitting it to the IRS.

F. CERTIFICATION AND SIGNATURES

By signing this worksheet, we certify all the information reported on this worksheet and any additional documentation provided are complete and accurate. If asked, we agree to provide additional documentation needed to clarify and verify accuracy.

Student Signature

Date

Parent Signature

Date

Return this worksheet, and other documents to:
CCAD Student Central—Office of Financial Aid
60 Cleveland Ave., Columbus, OH 43215
Phone: 614.222.3295 | Fax: 614.222.4034
financialaid@ccad.edu

FOR OFFICE USE ONLY: If verifying from a Federal Tax Return Transcript, list values for below items unless \$0

	AGI	Exemptions	Taxes Paid	Tax-Exempt Int.	Untaxed IRA
Student					
Parent					
	Untaxed Pnsn	IRA Deduct	Keogh/SEP	Edu. Credits	Other Untaxed
Student					
Parent					