

# INDEPENDENT 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. MARITAL INFORMATION (ONLY REQUIRED IF STUDENT IS MARRIED, DIVORCED, OR SEPARATED)

COMPLETE THE TABLE BELOW.

- **If married, divorced, or separated, include** your most recent marital status and date;
- **If married, include** your spouse's name, date of birth, and the name of the college they are attending.
- **Do not complete this section** if you are single/unmarried.

Marital Status (check only one)	Spouse's Name: (if married)		
<input type="checkbox"/> Married	Date of Most Recent Marital Status (MM/YYYY)	Spouse's Date of Birth (if married)	College attending 2021-2022
<input type="checkbox"/> Divorced/Separated	_____ / _____		

## C. FAMILY INFORMATION

- **Include** your (and your spouse's) children (including any unborn children expected to be born prior to July 1, 2022) if you (or your spouse) 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 you and you (or your spouse) 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 your spouse 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.**

### For Office Use Only

Total Household Size: \_\_\_\_\_  
Total Number in College: \_\_\_\_\_

## D. CHILD SUPPORT PAID

If you (or your spouse) 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.

### STUDENT

#### 1) 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 Tax Return.†
- I did not file a 2019 Federal Tax Return but did work and/or have earned income and have included W-2(s) and listed income below.†  
**Student:\$** \_\_\_\_\_

### SPOUSE (only required if student is married)

#### 2) Check one of the following:

- My spouse filed a 2019 Federal Tax Return\*  
**Circle:** Transcript Enclosed **or** IRS DRT Used
- My spouse was not employed and had no earned income in 2019 and did not file a 2019 Federal Income Tax Return.†
- My spouse 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](https://irs.gov/individuals/get-transcript) or by calling 1-800-908-9946.

†Any student (or spouse) 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

\_\_\_\_\_  
Spouse's Signature (if married)

\_\_\_\_\_  
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](mailto: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
Untaxed Pnsn	IRA Deduct	Keogh/SEP	Edu. Credits	Other Untaxed