

Form 1 – Independent Applicant 2019-2020

Financial Aid Office
Bristol Community College 777 Elsbree Street Fall River, MA 02720

Your 2019-20 Free Application for Federal Student Aid (FAFSA) was selected for verification. You must confirm the information you reported on your FAFSA. Complete and sign this worksheet and submit the form and other required documents to the Financial Aid Office. Additional information may be requested once these documents are reviewed. If you have questions about verification, contact the Financial Aid Office.

900 _____ - _____ - _____ / ____ / ____
Bristol ID number Social Security number Date of Birth

Last Name First Name M. I.

Street Address City State ZIP

Home Phone Cell Phone

A. Family Information

List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2019 through June 30, 2020, or if the child would be required to provide your information if they were completing a FAFSA for 2019-20. Include children who meet these standards, even if they do not live with you.
- 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 through June 30, 2020.

Full Name	Age	Relationship	If attending college during 2019-20, list name of college	Enrolled at least half time in college?
Example: Missy Jones	28	Wife	Central University	Yes
Enter student name in this box		Self	Bristol Community College	

Check here if you or your spouse listed above **PAID OUT** child support in 2017 and complete the chart below.

Name of Person Who Paid Child Support	Name of Person <u>to</u> Whom Child Support was Paid	Name of Child <u>for</u> Whom Support was Paid	Amount of Child Support Paid in 2017

Check here if you or your spouse listed above **RECEIVED** child support in 2017 and complete the chart below.

Name of Person Who Received Child Support	Name of Child for Whom Support was Received	Amount of Child Support Received in 2017

B. Student/Spouse Information to be Verified

Check the box that applies:

- I (and/or my spouse if married) filed a 2017 Federal Tax Return (check the box that applies)
 - I have used the IRS Data Retrieval Tool at www.fafsa.gov (recommended)
 - I have attached my/my spouse's 2017 Tax Return Transcript from the IRS
 - I will request my/my spouse's 2017 Tax Return Transcript and submit it by _____

- I (and/or my spouse if married) filed an amended 2017 IRS tax return and will provide the following three documents **(Required)**:
 - (a) 2017 Tax Return Transcript
 - (b) a signed copy of 2017 1040X
 - (c) 2017 Tax Account Transcript

- I (and/or my spouse if married) worked in 2017, but will not file a 2017 Federal Tax Return and will provide the following documents:
 - (a) 2017 Verification of NonFiling Letter **(Required)**
 - (b) Copies of all 2017 W-2s and/or 1099 Forms **(Required)**

Use this chart to report all income you earned in 2017.		
Employer's Name	Amount earned in 2017	IRS W-2 Form attached?

- I (and/or my spouse if married) did not work in 2017 and will not file a 2017 Federal Tax Return and will provide the following documents:
 - (a) 2017 Verification of NonFiling Letter **(Required)**

C. Other Income – Documentation may be requested

- Check here if someone in your household (who is listed on the chart in Section A) received any of the following benefits in 2017 or 2018. Place a checkmark below indicating which benefits were received:
 ___SNAP (Food Stamps) ___TANF/TAFDC/EAEDC ___Medicaid/SSI/SSDI ___WIC ___Free or Reduced Lunch

D. Certification and Signatures

I certify that all of the information reported on this worksheet is complete and correct.

WARNING If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Return this form by mail or in person to:
 Financial Aid Office, Bristol Community College, 777 Elsbree Street, Fall River, MA 02720