

Financial Assistance and Planning Office, Federal School Code: 003280

2015-2016 (V5) VERIFICATION – AGGREGATE

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for Aggregate verification. Incomplete forms will be returned for completion which will **DELAY** the processing of your financial aid.

STEP 1 – STUDENT INFORMATION

provide parental data on the FAFSA

Soc Sec Number Student ID
City/State/Zip
Email Address
PARENT(s): [Dependent students only]
☐ Never married ☐ Married/remarried
☐ Divorced or separated ☐ Widowed
☐ Unmarried and both parents living together
iate box and fill in grid below ☐ INDEPENDENT STUDENT**
You MUST include:
Yourself and your spouse, if married
Your dependent children, if you will provide more than
 half of their support from July 1, 2015 and June 30, 2016 even if they do not live with you. Other people if they now live with you, you provide more
than half of their support and will continue to do so between July 1, 2015 and June 30, 2016.
Identify the people in your household who will be college students between July 1, 2015 and June 30, 2016.
**A student is considered independent if he/she was NOT required to provide parental data on the FAFSA

	Full Name	Age	Relationship to student	Name of <u>College or University</u> attending (if at least ½ time during 2015-2016)
Exam	Erin A. Smith	18	Self	Keystone College
1 Jun	Nancy T. Smith	45	parent	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1		Self	Keystone College
~	2			
	3			
	4			
	5			

Last Name First I	Name Soc Sec N	umber Student ID	
	file a 2014 Federal Income Tax Ro Tool to transfer financial informa Tax Return Transcript from the In	eturn?	
Complete the table below and atta issue a W-2. If no income write NONE.	ach copies of ALL W-2's only if yo	u did not file taxes. List all employ	ers even if they did n
Name	Employer's Name	Amount Earned	W-2 attached?
Erin A Smith (student)	Burger King	\$2,365.00	⊠ Yes □ No
1		\$	☐ Yes ☐ No
2		\$	☐ Yes ☐ No
3		\$	☐ Yes ☐ No
4		\$	☐ Yes ☐ No
*If you are an independe	nt student, you must include spo	use's information in STEP 4	
Are you or will you be required to YES, I used IRS Data Retrieval YES, I am attaching a <u>Federal 1</u> NO, I certify that I have not file Complete the table below and attaching	file a 2014 Federal Income Tax Ro Fool to transfer financial informations as Return Transcript from the Interest and I am and I am ach copies of ALL W-2's only if yo		y of a Federal Tax Re r 2014.
issue W-2. If no income write No	Employer's Name	Amount Earned	W-2 attached?
Name William A Smith (parent)	Donovan Bros	\$57,598.00	⊠ Yes □ No
2		\$	☐ Yes ☐ No
3		\$	☐ Yes ☐ No
4		\$	☐ Yes ☐ No
Tax Transcript Information/Inst	ructions		

- •To obtain an IRS tax return transcript, go to http://www.irs.gov/Individuals/Get-Transcript or call 1-800-908-9946. Make sure to request the "IRS tax return transcript".
- •You can also retrieve your financial information by using the IRS Data Retrieval Tool that is part of FAFSA on the Web. Go to FAFSA.gov, log in to the student's FAFSA record, select "Make FAFSA Corrections", select the Financial Information section and follow the instructions. Once the data has been successfully transferred, sign and resubmit your FAFSA.
- •It takes up to two weeks for IRS income information to be available for electronic IRS tax return filers, and up to eight weeks for paper IRS tax return filers.
- •If you or your parents have filed an amended IRS tax return you are required to provide an IRS tax return transcript and an IRS tax account transcript.

Last Name	First Name	Soc Sec Number	Student ID	
STEP 5 – SUPPLEMEN – YEAR 2013 or 2014	ITAL NUTRITION ASSISTAN	ICE PROGRAM OR SNAP (fo	ormerly known as food stam	ps)
			n Step 2) received benefits from th rs. Documentation of SNAP benefi	
STUDENT		PARENT		
☐ YES	□ NO		YES 🗆 NO	
STEP 6 – CHILD SUPP	ORT RECEIVED & PAID – YE	AR 2014		
Did you or your parent/sto	ep-parent <u>PAY</u> child support in 20 support payments may be requ	in 2014? ☐ NO ☐ YES amou 014? ☐ NO ☐ YES – if YES com ested. <i>If you need more space,</i>		ludes
Name of Person W Child Support	ho Paid Name of Person to Child Support wa			
Nobelt Silliti	Nancy Smitl	h Kenneth Smith	th 10 \$6,000.00	
1				
2				
3				
Each person signing this wagree to provide informat to verify information repo	ion that will verify the accuracy o	of information provided. The secr and other agencies. If you purpose	mplete and correct. If asked, you w retary of education has the author ely give false or misleading	
Student's Signature		Da	Pate	
	t signature required for depende	· · · · · · · · · · · · · · · · · · ·	Pate	
	AME, SOCIAL SECURITY NUME ATTACH ANY REQUESTED DO	BER and/or STUDENT ID on each	ch page of this form	

- IF THIS FORM IS INCOMPLETE IT WILL BE RETURNED AND FINANCIAL AID WILL NOT BE PROCESSED
- The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and/or your parents reported on your FAFSA. The financial aid administrator at your school will compare your FAFSA with the information on this worksheet and any other required documents. If there are differences, your FAFSA information may need to be corrected. Your school may ask for additional information.
- Please complete this form within 15 DAYS of receipt and return to the Financial Aid Office

2015-2016 (V5) VERIFICATION - AGGREGATE GROUP

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IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE

Last Nam	ie	First Name	Social Security Number	Student ID
ITHER	•			
• DR:	government-issue Keystone College v official at Keystone College's financial	d photo identification (ID), s will maintain a copy of the st e College authorized to colle aid official, the Statement o	ct the student's ID. In addition, the studen f Educational Purpose below.	e, or other state-issued ID, or passport. ne date it was received and the name of th
	but not limite	ed to a driver's license, other	noto identification (ID) that is acknowledge state-issued ID, or passport; AND ational Purpose provided below. Faxes a	ed in the notary statement below, such as nd scanned copies are NOT acceptable.
Staten	nent of Educationa	l Purpose		
Logrtif	y that I		am the in	dividual signing this
i certii		Print Student's Name	ani the mi	uividuai sigiiiiig tiiis
Statem			al student financial assistance I may receiv	ve will only be used for education
		cost of attending Keystone C		ve will only be used for education
parpos	ses and to pay the t	out of attending Rejutone o	0.0000000000000000000000000000000000000	
Studer	nt Signature		Date	
Notar	y's Certification (of Acknowledgement (only	y needed when student is unable to appear I pe	erson at Keystone College)
State c	of		City/County of	
on			, before me	
nerson	nally anneared		, and provided	d me on hasis of satisfactory evidence
person	iany appeared,		, and provided	a file off basis of satisfactory evidence
of ide	ntification			
	Type of g	overnment-issued photo ID	provided to be the above-named person v	who signed the foregoing instrument
_				
Witnes	ss my hand and off	icial seal	Sea	
My Co	mmission expires o	n (date)		
For Of	fice Use Only: Atta	ich photocopy of ID after vei	rifying identity.	
Dogue	aant Usad	nt Used Document Expiration Date		
Docum	ient Osed		bocument expiration	Date
Date R	Received	Kevstone C	ollege Official	