

Return to: Rowan-Cabarrus Community College Financial Aid Office 1531 Trinity Church Rd. Concord, NC 28027

Submit online at: https://bit.ly/RCCCFASubmissionLink

EMAIL: fin.aid@rccc.edu FAX: 704-216-0940

2023-2024 Financial Aid Verification Worksheet

You have been sent this form because your application was selected for review in a process called **verification.** Before awarding any federal aid, this process must be completed.

STUDENT INFORMATIO	N		
Last Name	First Name		RCCC Student ID #
Mailing Address	City/State/Z	ip	Date of Birth
Phone # (Include Area Code)		Em	nail Address
A. INSTRUCTIONS FOR	TAX RETURN FILERS: Pleas	e read to understand your tv	vo choices.
and select apply for aid, log in	I Tool is the preferred way to verify inco to the student's FAFSA. Select "Make I ons to determine if the student and/or	AFSA Corrections" and navigate to tl	ne Financial Information section of
www.IRS.gov/Individuals/Get-	I RS Data Retrieval Tool or refuse to u <u>Transcript</u> to obtain and print your tax		
tax return transcript" and not	t the "IRS tax account transcript."		
married), or student's p income tax return with Check the box that applies:	ION-TAX RETURN FILERS: Coparent(s) (for dependent stude the IRS.	nts) will not file and is not re	equired to file a 2021
The student/spouse v	vill <u>not</u> file a 2021 tax return.	The parent(s) will not file a 2021	tax return.
Amount earned from Student Spouse		Amount earned from workin Parent(s)	g in 2021:
C. CHILD SUPPORT PAI	D: Complete if anyone listed in	n the household paid child s	upport in 2021.
	someone in the household (persons lis It was paid for each child. If asked by th		
Name of person who paid child support	Name of person to whom child support was paid	Name of child for whom support was paid	Amount of Child support paid in 2021
Marty Jones	Chris Smith (example)	Terry Jones	\$6,000.00

D. INCOME INFORMATION

Federal aid is based on need as determined by the US Department of Education; therefore, some type of income or support is required to document your actual 2021 situation. **NOTE:** If you list income or assets that appear to be insufficient to meet basic living expenses, additional information may be requested. Include the <u>annual</u> amounts for 2021, not monthly amounts.

	Name	Relationship (self, spouse, parent)	Annual Amount
Child support <u>received</u> for all children. Do not include foster or adoption payments.			
Additional untaxed income such as worker's comp, veteran's non-education benefits, money received or paid on your behalf. Source			

E. HOUSEHOLD INFORMATION

Dependent students are required to include parent information on the FAFSA.

If you are a **dependent student**, include:

- Yourself
- Your parent(s) used on FAFSA (include stepparent)
- Your parent(s) other dependent children if: your parent(s) will provide more than half of their support from July 1, 2023 through June 30, 2024, or the children would be required to provide parental information if filing a FAFSA
- Other people, only if they now live in your parents' household, and your parents will provide more than half of their support from July 1, 2023 through June 30, 2024

If you are an **independent student**, include:

- Yourself
- Your spouse (if you are married)
- Your children, if you will provide more than half of their support from July 1, 2023 through June 30, 2024
- Other people, only if they live in your household and you provide more than half of their support and will continue to do so from July 1, 2023 through June 30, 2024

Full Name	Age	Relationship	Name of College and Degree Program (If at least half-time student for 2023-2024)
		Self	RCCC/

CERTIFICATION:

By signing this works false or misleading in	sheet, I certify all the	e information repor	ted is complete and	d correct. Warning: If	you purposely give
false or misleading in	iformation, you may	be fined, sent to p	orison, or both.	9	

Student Signature	Student Name (Please Print)	Date	
Parent Signature (If student is dependent)	Parent Name (Please Print)	Date	_