

COMPLETE AND RETURN TO:

4500 Steilacoom Blvd. SW Bldg 17, Room 130 Lakewood, WA 98499-4004

School Code: 015984

253.589.5660 office 253.589.5618 fax

STUDENT AID & SCHOLARSHIPS DEPENDENT VERIFICATION WORKSHEET 2022-2023 V5 AGGREGATE with NOTARY

You must appear in person before a Certified Notary of the Public and show them your valid, government-issued photo ID **AND** sign the Educational Purpose Statement (section F) in the presence of the Certified Notary of the Public. You must then mail this worksheet, along with the original notary document, to the Student Aid & Scholarships Office.

The Student Aid & Scholarships office cannot process your application without this information.

Federal Student Aid Programs: Your application was selected for review in a process called "Verification." In this process, the Student Aid & Scholarships Office will be comparing information from your FAFSA application with you and your parent(s)' financial documents. We are required to review your FAFSA information under financial aid program rules (34 CFR, Part 668). The law says we have the right to ask you for this information before awarding Federal aid. If there are differences between your application information and your financial documents, corrections to your FAFSA may be required.

A: Student Info	ormation			
Last	First	MI	SSN	SID
	Email	@student.cpt	c.edu.edu	phone
B: Family Infor	mation			
In the table below, include: ✓ Yourself and ✓ Your parent(s) (including stepparent) even if you don't live with them ✓ Your parents' other dependent (under age 24) children, even if they don't live with your parent(s), if your parents will provide more than half of their support from July 1, 2022 through June 30, 2023.			more than half of their sup	ents, and your parents provide

List yourself first, then <u>all</u> household members supported by your parents (do not include boyfriend/girlfriend or fiancés). If any household member, excluding your parent(s), will be attending college at least half time in a degree or certificate program, include the name of the college. If you need more space, attach a separate page.

Full Name	Age	Relationship	If enrolled in college from 07/01/22 – 06/30/23, name of college
		Self	Clover Park Technical College

C: Student and Parent Tax and Income Information - Check only one box below for Student AND

documents).	ur FAFSA online at <u>www.fafsa.gov</u>	and using the IKS Data	Retrieval 1001 (This is faster than submitting signed co	pies of your 1040 tax	
	STUDENT		PARENT		
 □ I used the IRS Data Retrieval Tool on the FAFSA. If you used the IRS Data Retrieval Tool, and did not change the information, you do not need to submit copies of your 1040 tax documents. □ I am attaching my 2020 signed copy of my 1040. □ I filed an amended 2020 Tax Return. If you select this option you must submit a signed copy of a 1040 tax return document and a signed copy of your 1040X. 		 I used the IRS Data Retrieval Tool on the FAFSA. If you used the IRS Data Retrieval Tool, and did not change the information, you do not need to submit copies of your 1040 tax documents. I am attaching my 2020 signed copy of your 1040. I filed an amended 2020 Tax Return. If you select this option you must submit a signed copy of a 1040 tax return document and a signed copy of your 1040X. I did not file a 2020 Tax Return AND I am not required to file a 			
 I did not file a 2020 Tax Return AND I am not required to file a Tax Return. If you select this option, list your employer(s) and income earned and attach W-2s or Wage & Earnings Statement from the IRS. I did not file a 2020 Tax Return and did not have earnings in 2020. 		Tax Return. If you select this option, list your employer(s) and income earned and attach W-2s or Wage & Earnings Statement from the IRS. I did not file a 2020 Tax Return and did not have earnings in 2020. If you did not file a 2020 Tax Return and did not have earnings in 2020 you must submit a letter from the IRS verifying your no filing status.			
Employer		Earnings/Income	Employer	Earnings/Income	
		\$		\$	
		\$		\$	
		\$		\$	
		\$		\$	
Enter the amou			u or your parent received from January 1, 2020 – D O NOT LEAVE ANY ITEM BLANK.	ecember 31, 2020.	
STUDENT		Enter YEAR	LY Amounts	PARENT	
\$	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040- Schedule 1 Line 15 plus 19.			\$	
	Tax exempt interest income fr	om IRS Form 1040-lin	ne 2a		

Enter zero when appropriate. DO NOT LEAVE ANY ITEM BLANK.			
STUDENT	Enter YEARLY Amounts	PARENT	
\$	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040- Schedule 1 Line 15 plus 19.	\$	
\$	Tax exempt interest income from IRS Form 1040-line 2a.	\$	
\$	Untaxed portions of IRA distributions and Untaxed portions of pensions from IRS Form 1040-lines (4a + 5a) minus (4b + 5b) Exclude rollovers. If negative, enter a zero here.	\$	
\$	Education Credits (American Opportunity, Hope of Lifetime Learning tax credits) from IRS form 1040- Schedule 3 line 3.	\$	

D: High School Completion Status

Please check	conly one box and	l provide required	document(s).

- High School Diploma. Attached is a copy of my diploma or high school transcript indicating graduation date.
- **GED**. Attached is a copy of my GED certificate.
- Home School Graduate. Attached is a transcript signed by my parent or guardian listing the secondary courses completed and documents the successful completion of secondary school.

E: Required Signatures

I affirm that the information provided in this application and other financial aid documents is true and correct to the best of my knowledge. I agree that I have reviewed, understand and agree to the conditions, responsibilities and obligations in order to receive financial aid for the 2022-2023 academic year as stated in the Conditions of Award Packet and Satisfactory Academic Progress Policy available on the Student Aid & Scholarship website.

Student Name:	Signature:)ate:
Parent Name:	Signature:)ate:
The college provides equal opportunity in education and employment and do orientation, marital status, creed, religion, or status as a veteran of war. Prol types).			
F: Educational Purpose: Completion of this section PUBLIC.	on MUST BE WIT	NESSED AND SIGNED BY A NOTAR	Y OF THE
If the student is unable to appear in person at Clover Park	Technical College to	verify his or her identity, the student	must provide:
(a) A copy of the valid government-issued photo identificate but not limited to a driver's license, other state-issued I		owledged in the notary statement belo	ow, such as
(b) The original notarized Statement of Educational Purpos	se provided below.		
Statement of Educational Purpose			
I certify that I and that the federal (Print Student's Name)	am the indivi	dual signing this Statement of Educatio	nal Purpose
Student financial assistance I may receive will only be used Technical College for 2022-2023.	for educational pu	rposes and to pay the cost of attending	; Clover Park
(Student's Signature)	(Date)	(Student's ID Number)	
Notary's Certificate of Acknowledgement			
State of	City/County of _		_
On, before me,(Date) (Notary's name)	·	
personally appeared, of (Printed name of signer)	, a	nd provided to me on basis of satisfact	ory evidence
identificationinstrument. (Type of government-issued photo ID provided		-named person who signed the forego	ing
WITNESS my hand and official seal			
	ommission expires o		
(Notary signature)		(Date)	