

COMPLETE AND RETURN TO: 4500 Steilacoom Blvd. SW Bldg. 17, Room 130 Lakewood, WA 98499-4004; finaid@cptc.edu School Code: 015984

253.589.5660 office

253.589.5618 fax

STUDENT AID & SCHOLARSHIPS DEPENDENT VERIFICATION WORKSHEET 2023-2024 V1 STANDARD

Submit this worksheet and applicable documents, to the Student Aid & Scholarships Office, in person, by email, by mail or by fax.

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 Information

Last	First	МІ	SSN	Empl ID#
		@students.cptc.edu		()
	Email		Date of Birth	phone

B: Family Information					
n the table below, include: Yourself Your parent(s) (including stepparent) even if you don't live with them	Include other people as part of your parents' household ONLY if: They now live with your parents, and your parents provide				
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, 2023 through June 30, 2024.	more than half of their support and will continue to provide more than half of their support from July 1, 2023 through June 30, 2024 Documentation may be required.				

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 attending college from 07/01/23 – 06/30/24 college name.
		Self	Clover Park Technical College

Check only one box below for Student AND only one for Parent.

You can correct your FAFSA online at <u>www.fafsa.gov</u> and using the IRS Data Retrieval Tool (This is faster than providing signed copies of your 1040 tax documents.)

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 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 2021 signed copy of my 1040. I filed an amended 2021 Tax Return. If you select this option you must submit a signed copy of your 1040 tax return document and a signed copy of your 1040X. I did not file a 2021 Tax Return AND I am not required to file a Tax Petturn. If the amended to file a the submit of t		
□ I am attaching my 2021 signed copy of my 1040 .				
I filed an amended 2021 Tax Return. If you select this option you must submit a signed copy of your 1040 tax return				
document and a signed copy of your 1040X.				
I did not file a 2021 Tax Return AND you 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.		 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 2021 Tax Return and did not have earnings in 		
\Box I did not file a 2021 Tax Return and did not have earnings in		2021. If you did not file a 2021 Tax Return and did not have		
2021.		earnings in 2021 you must submit a letter fr your no filing status.	om the IRS verifying	
Employer	Earnings/Income	Employer	Earnings/Income	
	\$		\$	
	\$		\$	
	\$		\$	

Enter the an	Enter the amounts of earned and/or untaxed income and benefits received for both student and parent from January 1, 2021– December 31, 2021. Enter <u>zero</u> 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: Required Signatures

I affirm that the information provided in this application and other Student Aid & Scholarships 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 2023-2024 academic year as stated in the Conditions of Award Packet and Satisfactory Academic Progress Policy available on the Student Aid & Scholarships website.

Student Name:___

Signature: _____

Date: ____

Parent Name: _

Signature: ____

Date:

The college provides equal opportunity in education and employment and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, marital status, creed, religion, or status as a veteran of war. Prohibited sex discrimination includes sexual harassment (unwelcome sexual conduct of various types).