



2020-21

V5

VERIFICATION WORKSHEET

LAST NAME	FIRST NAME	Student ID#	Soc. Sec. #	Birthdate	Ph #
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Submit to the Financial Aid Office within 30 days after notification. If more space is needed for any item on this form, provide a separate page that includes the student's name and ID number at the top

SECTION 1 - NUMBER OF HOUSEHOLD MEMBERS AND NUMBER IN COLLEGE

INSTRUCTIONS FOR DEPENDENT STUDENTS: <---OR--->List below the people in the parent's household. Include:

- student
- parents (including stepparent) even if student does not live with the parents
- parent's other children if the parents will provide more than 1/2 their support from July 1, 2020 through June 30, 2021, or if they would be required to provide parental information if they were completing the 2020-21 FAFSA. Include children who meet either of these standards even if not living with parents
- other people if they now live with the parents and parents provide more than 1/2 their support between Jul 1, 2020 and June 30, 2021

INSTRUCTIONS FOR INDEPENDENT STUDENTS:

List below the people in the student's household. Include:

- student & student's spouse if married
- student's and/or spouse's children if the student or spouse will provide more than 1/2 of the children's support from July 1, 2020 through June 30, 2021, even if the child does not live with the student.
- other people if they now live with the student and the student or spouse provides more than 1/2 of the other person's support and will continue to provide more than 1/2 of that person's support through June 30, 2021

Number in College: Also include in the space below information about any household member (see above for definitions) who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary institution any time between July 1, 2020 and June 30, 2021. Include the name of the college

FIRST NAME	M.I.	LAST NAME	AGE	RELATIONSHIP	COLLEGE	1/2 TIME?

SECTION 2 - TAXES (check the box for student and, if applicable, spouse or parent(s) that applies)

Filed a 2018 Federal Tax Return with the IRS and 'linked' taxes using the IRS Data Retrieval Tool or

provided a **signed copy of their 2018 Tax Return**

Date linked : _____

☐ Student ☐ Spouse (if married) ☐ Parent 1 (if dependent) ☐ Parent 2 (if dependent)

Will not file and are not required to file a 2018 tax return with the IRS, but **WAS EMPLOYED IN 2018** = Parent(s) and Independent student(s) must provide the 2018 IRS "Verification of non-filer letter" and all 2018 W2's.

☐ Student ☐ Spouse (if married) ☐ Parent 1 (if dependent) ☐ Parent 2 (if dependent)

Will not file and are not required to file a 2018 tax return with the IRS, and **WAS NOT EMPLOYED** in 2018 = Parent(s) and Independent student(s) must submit the 2018 IRS "Verification of non-filer. letter"

FOR NON-TAX FILERS: List the name of each employer, amount earned in 2018 & whether a W-2 form is attached.

STUDENT/SPOUSE 2018 INCOME FROM WORK	W2 attachd?	PARENT(S) 2018 INCOME FROM WORK	W2 attachd?
Source: \$	<input type="checkbox"/>	Source: \$	<input type="checkbox"/>
Source: \$	<input type="checkbox"/>	Source: \$	<input type="checkbox"/>
Source: \$	<input type="checkbox"/>	Source: \$	<input type="checkbox"/>
Total Income from Work \$		Total Income from Work \$	

CERTIFICATION

EACH PERSON SINGING
CERTIFIES THAT ALL OF THE
INFORMATION REPORTED IS
COMPLETE & CORRECT

X _____

X _____

STUDENT SIGNATURE

DATE

PARENT SIGNATURE

DATE

Warning: If you purposely give false or misleading information, you may be fined, sentenced to jail, or both.

Submit form to :Financial Aid Office | finaid@eastcentral.edu | fax 636-583-6651 | call 636-584-6588 | 1964 Prairie Dell Road, Union, MO 63084



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VERIFICATION WORKSHEET

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Identity and Statement of Educational Purpose

You, the student must appear in person at East Central College to verify your identity by presenting a valid government-issued photo identification (ID), such as but not limited to, a driver's license, other state-issued ID, or passport. East Central College will maintain a copy of your photo ID that is annotated with the date it was received & reviewed & the name of the official at the institution authorized to collect your ID. In addition, you must sign, in the presence of the institutional official, the following Statement of Educational Purpose.

ONLY to be signed AT THE INSTITUTION or in the presence of a Notary Public

AUTHORIZED COLLEGE OFFICIAL:

STUDENT:

Copy student unexpired, valid government-issued photo ID
AT THE TIME of their signing the Statement & annotate
that copy with your name and the date verifying student
identity. You may place it below & make a copy:

AUTHORIZED OFFICIAL NAME

DATE

Statement of Educational Purpose

I certify that I _____
(print Student's name)

am the individual signing this Statement of
Educational Purpose and that the Federal student
financial assistance I may receive will only be used
for educational purposes and to pay the cost of
attending East Central College for 2020-21

(Student's Signature)

(Date)

Student ID# (required)

if you're unable to be present at East Central College: Notary's Certificate of Acknowledgement (below)

If you, the student, are unable to appear in person at East Central College to verify your identity, you must provide:

- (a) **A copy of the unexpired, valid government-issued photo identification (ID)** that is acknowledged in the notary statement or that is presented to a notary, such as but not limited to, a driver's license, other state-issued ID, or passport; and
- (b) **The original Statement of Educational Purpose provided above, which must be notarized.** If the notary statement appears on separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

THIS STATEMENT & COPY OF ID MUST BE SUBMITTED TO EAST CENTRAL COLLEGE IN ORIGINAL PAPER FORM

State of _____ City/County of _____ On (date) _____ before me,
(Notary's name) _____, personally appeared, (signer) _____, and
proved to me on basis of satisfactory evidence of identification (type of ID) _____
to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(Notary signature)

My commission expires on (Date) _____

(seal)