



2009-2010 Institutional Verification Form

The Federal Government requires colleges to check the accuracy of the information on Student Aid Reports. This process is called verification. You must verify your information before you are awarded financial aid. Complete the information requested on this form, sign where required, and return it by mail or in person to **Financial Aid & Veterans' Affairs Office, One College Park, Decatur, IL 62521**

Student's Name _____ SSN or Student ID _____

Address _____ City _____ State _____ Zip _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

E-mail Address _____ (Only an RCC e-mail address will allow us to e-mail you.)

Other names used while attending RCC _____ Year of HS Graduation _____

Are you in default on a student loan? Yes No Do you live with your parents? Yes No

Do you owe a repayment of a Federal or State grant at any school previously attended? Yes No

- I have not attended college, university, or trade school.
- I have attended the following college(s) or university(ies).

_____	_____	_____	<input type="checkbox"/> since high school	<input type="checkbox"/> in high school
Name of School Attended	City/State	Dates Attended		
_____	_____	_____	<input type="checkbox"/> since high school	<input type="checkbox"/> in high school
Name of School Attended	City/State	Dates Attended		
_____	_____	_____	<input type="checkbox"/> since high school	<input type="checkbox"/> in high school
Name of School Attended	City/State	Dates Attended		

**You must be working toward a degree or certificate to receive financial aid!
Aid is calculated using only courses in your degree program.**

Indicate the certificate or degree you are currently working toward. (Check one.)

- A.A., A.S., A.E.S., A.F.A., A.A.T., or A.L.S.
- Basic Certificate in _____
- Associate in Applied Science in _____
- Advanced Certificate in _____

If you (or your parents) feel unusual financial circumstances are not reflected on your student aid report, please submit a Special Circumstances Application available in the Financial Aid Office.

**I (We) certify that all of the information on this form is complete and correct.
WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.**

If parents' information is required on the back page, one parent must also sign and complete this section.

X _____
Parent's signature Date Parent's address

City State Zip

X _____
Student's signature Date **X** _____
Spouse's signature Date

Richland Community College subscribes to the principles and laws of the State of Illinois and the Federal Government pertaining to civil rights and equal opportunity, including applicable Executive Orders. Richland Community College policy prohibits discrimination on the basis of race, color, religion, sex, marital or parental status, national origin or ancestry, age, mental and/or physical disabilities (except where they are bona fide occupational qualifications), sexual orientation, gender identity, military or veteran status, or other legally protected characteristics or conduct. Questions regarding compliance may be directed to the Equal Employment Opportunity Commission Office.

PLEASE COMPLETE BOTH SIDES OF THIS FORM!

You may be asked to provide proof of the following information.

Student's (& Spouse's) 2008 Income Information

1. I have filed (or will file) a 2008 U.S. income tax return.
- I will not and am not required to file a 2008 tax return. If married, my spouse also will not and is not required to file a 2008 tax return.

**Parents' 2008 Income Information
(Dependent Students Only)**

1. My parents have filed (or will file) a 2008 U.S. income tax return.
- My parents will not file and are not required to file a 2008 tax return.

2. Please list ANNUAL dollar amounts as they apply to the following as listed on FAFSA.

<u>Student/Spouse Information</u>	<u>Parent Information</u>
_____ Welfare benefits, including Temporary Assistance for Needy Families (TANF). Don't include food stamps.	_____
_____ Social Security benefits received that were not taxed (such as SSI).	_____
_____ Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including amounts reported on the W-2 Form in Box 12, codes D,E,F,G,H, and S.	_____
_____ IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans from IRS Form 1040 – lines 28 & 32 or 1040A – line 17.	_____
_____ Child support received for all children. Don't include foster care or adoption payments.	_____
_____ Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits).	_____
_____ <u>Veterans' non-education benefits</u> such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-study allowances.	_____
_____ Any other <u>untaxed income</u> or benefits not reported elsewhere on FAFSA Worksheets A and B, such as worker's compensation, untaxed portions of railroad retirement benefits, Black Lung benefits, disability, etc. Don't include student aid, Workforce Investment Act educational benefits, or benefits from flexible spending arrangements, e.g., cafeteria plans.	_____
_____ Money received, or any money paid on your behalf, not reported elsewhere on this form.	XXXXXX
_____ Child support paid because of divorce or separation or as a result of a legal requirement. Don't include support for children in your (or your parent's) household.	_____
_____ Taxable earnings from Federal Work-study or other need-based work programs.	_____

3. If you are an INDEPENDENT STUDENT, list the people you will support between **July 1, 2009, and June 30, 2010**. Include yourself and your spouse. Include your children if they get more than half of their support from you. Include other people only if they now live with and get more than half of their support from you and will continue to get this support between **July 1, 2009, and June 30, 2010**.

If you are a DEPENDENT STUDENT, list the people your parents will support between **July 1, 2009, and June 30, 2010**. Include your parents and yourself. Include your parents' other children if they get more than half of their support from your parents or if they would be required to provide parental information when applying for Federal student aid. Include other people only if they now live with and get more than half of their support from your parents and will continue to get this support between **July 1, 2009, and June 30, 2010**.

First Name Last Name (Please PRINT YOUR NAME FIRST.)	Age	Relationship to YOU (the student) (parent, brother/sister, etc.)	If this person will attend college half-time or more in 2009-2010, PRINT the name of the COLLEGE.
(YOUR NAME HERE) 1.		<i>Student/Applicant</i>	<i>Richland Community College</i>
2.			
3.			
4.			
5.			
6.			
7.			

PLEASE COMPLETE BOTH SIDES OF THIS FORM!