

**Sinclair Community College**  
**2009-2010 Verification Worksheet**  
**Federal Student Aid Programs**

*Financial Aid & Scholarships*  
*444 W. Third Street*  
*Dayton, Ohio 45402-1460*  
*Phone: (937) 512-3000*  
*Fax: (937) 512-2982*  
*E-mail: [finaid@sinclair.edu](mailto:finaid@sinclair.edu)*

**Instructions for completing the Verification Worksheet**

The verification worksheet is part of the verification process. If there are differences between the FAFSA and the worksheet, corrections may be made to your file. You will need to provide a copy of your and your spouse's (or your parents', if dependent) federal income tax forms, W-2 forms, and any other documentation that indicated income for the 2008 year.

**A. Student Information – Please complete with current information**

---

Last name	First name	M.I.	Social Security Number
Address (include apt. no.)			Date of birth
City	State	Zip Code	Phone number (include area code)

**B. Family Information**

---

**Dependent Students:** (You are dependent if you are required to list parent financial information on the FAFSA)

List the people in your parents' household, include:

- yourself and your parent(s) (including stepparent) even if you don't live with your parents, and
- your parents' other children, even if they don't live with your parent(s), if (a) your parents will provide more than half of their support from July 1, 2009 through June 30, 2010, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
- other people if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

**Independent Students:**

List the people in your household, include:

- yourself, and your spouse if you have one, and
- your children, if you will provide more than half of their support from July 1, 2009 through June 30, 2010, and
- other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

Write the names of all household members in the space(s) below. Also write in the name of the college for any household member, excluding your parent(s), who will be attending college at least half time between July 1, 2009 and June 30, 2010, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship	College
		Self	Sinclair Community College

**C. Income Information**

TAX FILERS – All tax filers must submit a signed copy of 2008 Federal Income Tax returns (2008 IRS Form 1040, 1040A, 1040EZ, or a tax return from Puerto Rico or a foreign country) for anyone whose information appears on the FAFSA. Check box below for whom you are enclosing tax forms:

Don't forget to sign your tax forms! Do not submit any State or Local tax forms.

- You     Your spouse    Dependent Students only:    Your father (step)     Your mother (step)

NON-TAX FILERS – Check the box for those people who did not and are not required to file a 2008 Federal Income Tax Return. List below the employer(s) and any income received in 2008 (use W-2 forms or other earning statements *plus* any other earnings from work not reported on those forms).

- You     Your spouse    Dependent Students only:    Your father (step)     Your mother (step)

Name of Employer	Student Amount	Spouse or Parent(s) Amount
	\$	\$
	\$	\$
	\$	\$

**D. Use the tables below to report 2008 Yearly Amounts (not monthly). Please put in a "0" if you do not have an amount to list. Do not leave blank.**

2008 Additional Financial Information	Student/Spouse	Dependent Students Only Parent(s)
Child support you <b>paid</b> because of divorce or separation. Do not include support for children in your (or your parents') household, as reported in question 96 (or question 75 for your parents).	\$ /yr	\$ /yr
Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$ /yr	\$ /yr
Student grant, scholarship, and fellowship aid, including AmeriCorps awards, that was reported to the IRS in the adjusted gross income.	\$ /yr	\$ /yr
Combat pay or special combat pay that was taxable and included in the adjusted gross income. Do not enter untaxed combat pay reported on the W-2 (Box 12, Code Q).	\$ /yr	\$ /yr

2008 Untaxed Income	Student/Spouse	Parent(s)
Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including amounts reported on the W-2 Form in Boxes 12a – 12d, codes D,E,F,G, H and S.	\$ /yr	\$ /yr
Child support received for all children. Don't include foster care or adoption payments.	\$ /yr	\$ /yr
Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits).	\$ /yr	\$ /yr
Veterans' noneducation benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances.	\$ /yr	\$ /yr
Other untaxed income not reported, such as workers' compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, disability, etc. Don't include student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$ /yr	\$ /yr
Money received, or paid on your behalf (e.g., bills), not reported elsewhere on this form.	\$ /yr	XXXXXXXXXX

**E. Sign this Worksheet**

By signing this worksheet, I (we) certify that all the information reported on this worksheet is complete and correct. If dependent, at least one parent must sign.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent (Dependent Students Only)

\_\_\_\_\_  
Date