2018-2019 Dependent Verification Worksheet

Student Name	Student ID or SSN				
Address	Phone				
Number of Household Members and Number member who is, or will be, enrolled at least he postsecondary educational institution any tin college. If more space is needed, provide a secondary the people in the parents' house	nalf time ne betwe separate	in a degree, diploma, or een July 1, 2018, and Jur e page with the student's	certific ne 30, 2	ate program at an eligible 2019, and include the name of the	
• The student.					
Full Name	Age	Relationship		College	
		Self		Indian Hills Community College	
 The parents (including a stepparent) ever 	n if the	student doesn't live with	the par	rents.	
Full Name	Age	Relationship		ege, If Will be Enrolled at Least Half Time	
 The parents' other children if the parents through June 30, 2019, or if the other che completing a FAFSA for 2018–2019. Individual with the parents. Include other people only if they now live support, and will continue to provide more money, housing, food, clothes, medical and the parents. 	ildren we lude chi with the re than h	ould be required to provid ldren who meet either of e parents and the parents nalf of that person's supp	de pare these s s provi	ental information if they were standards, even if a child does not live de more than half of the other person's bugh June 30, 2019. Support includes	
Full Name	Age	Relationship		ege, If Will be Enrolled at Least Half Time	
Did you attend a college other than IHCC	during	the 2018-19 school year	?	Yes No	
3. Have you or will you be required to file a *Submit a Student NonTax Filer Form avail				Yes *No 2016 W-2 and 2016 1099 forms you received.	
4. Have your parent(s) filed or will they be r *Submit a Parent NonTax Filer Form availa *Submit an IRS Verification of Non-filing Le transcript.	ble on the	WebAdvisor. Be sure to subm	nit all 20	16 W-2 and 2016 1099 forms they received.	
5. Certification and Signature				WARNING: If you purposely give false or	
Each person signing below certifies that all cand correct (the student and at least one parsignature, not typed, is required.			plete	misleading information, you may be fined, sent to prison, or both.	
Student's Signature (Required)				Date	
Parent's Signature (Required)				Date	

Please return this completed form and all other required materials to:

Ottumwa Campus: Indian Hills Community College, Attn. Financial Aid, 525 Grandview Avenue, Ottumwa, Iowa 52501 Fax: 641-683-5741, Phone: 800-726-2585, ext. 5262 or 641-683-5262, Email: OneStop@indianhills.edu Centerville Campus: Indian Hills Community College, 721 North First Street, Centerville, IA 52544 Fax: 641-856-3158, Phone: 800-670-3641, ext. 2200 or 641-856-2143, ext. 2200