

CSM 2007-08 Verification Worksheet

Dependent

Federal Student Aid Programs

Because your application has been selected for a federal review process called "Verification," we must verify the accuracy of the data listed on your Free Application for Federal Student Aid (FAFSA). **Please carefully complete all the information on this form and submit copies of the tax documents requested in section C.** We will compare this information with the data listed on your FAFSA. If there are any differences, we will correct your FAFSA information. **Please provide all requested data!**

Incomplete forms will be returned and will delay processing of your application!

A. Student Information

<hr/> Last Name	<hr/> First Name	<hr/> M.I.	<hr/> Social Security Number
<hr/> Address (include apt. #)			<hr/> E-mail Address
<hr/> City	<hr/> State	<hr/> Zip Code	<hr/> Phone Number (include area code)

B. Family Information

List the people living in your parent's household. Include:

- Yourself;
- your parent(s) with whom you live (or last lived) -include stepparent;
- your parent(s)' other children if your parent(s) provide more than half of their support from July 1, 2007 through June 30, 2008; and
- any other people who now live with your parent(s) and will continue to live with your parent(s), and your parent(s) provide more than half of their support and will continue to provide more than half of their support from July 1, 2007, through June 30, 2008.

Write the names of all household members. 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, 2007 and June 30, 2008, and will be enrolled in a degree or certificate program. If you need more space, attach a separate page.

Full Name	Age	Date of Birth	Relationship	Name of College
			Self	College of Southern Maryland

C. Income information

TAX FILERS –All tax filers must submit a signed copy of all 2006 Federal Income Tax returns (2006 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:

- You
 Your father (step)
 Your mother (step)
 Don't forget to sign your tax forms!

NON-TAX FILERS - Check the box for those people who did not and are not required to file a 2006 Federal Income Tax Return.

- You
 Your father (step)
 Your mother (step)
 Don't forget to sign your tax forms!

List below the employer(s) and any income received by non-tax filers in 2006 (use W-2 forms or other earning statements *plus* any other earnings from work not reported on those forms).

Name of Employer	Student Amount	Parent(s) Amount

Student/Spouse Yearly Amount	Worksheet A - (Answer for Calendar year 2006)	Parent(s) Yearly amt.
\$ /yr	Welfare benefits, including Temporary Assistance for Needy Families (TANF). Don't include food stamps.	\$ /yr
\$ /yr	Social Security Benefits received that were not taxed (such as SSI)	\$ /yr
\$ /yr	Total A ENTER ZERO if none of A applies!	\$ /yr

Student/Spouse Yearly Amount	Worksheet B - (Answer for Calendar year 2006)	Parent(s) Yearly amt.
\$ /yr	Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including amounts reported on the W-2 Form in Box 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	Foreign income exclusion from IRS Form 2555 - line 45 or 2555EZ - line 18	\$ /yr
\$ /yr	Credit for federal tax on special fuels from IRS Form 4136 - line 20 - nonfarmers only	\$ /yr
\$ /yr	Housing, food, and other living allowances paid to military personnel (including BAH, BAS and untaxed pay for service in a combat zone), clergy, and others (including cash payments and cash value of benefits)	\$ /yr
\$ /yr	Veterans non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work/Study allowances	\$ /yr
\$ /yr	Any other untaxed income or benefits not reported elsewhere on Worksheets A and B, such as worker's compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, Refugee Assistance, etc. Don't include student aid, Workforce Investment Act educational benefits, or benefits from flexible spending (cafeteria) plans.	\$ /yr
\$ /yr	Money received , or paid on your behalf (e.g., bills), not reported elsewhere on this form.	XXXXXX
\$ /yr	Total B ENTER ZERO if none of B applies!	\$ /yr

Student/Spouse Yearly Amount	Worksheet C - (Answer for Calendar year 2006)	Parent(s) Yearly amt.
\$ /yr	**Child support paid because of divorce or separation. Do not include support for children listed on the front of this form.	\$ /yr
\$ /yr	Taxable earnings from Federal Work Study or other need-based work programs.	\$ /yr
\$ /yr	Student grant, scholarship, and fellowship aid, including AmeriCorps awards, that was reported to the IRS in your adjusted gross income .	\$ /yr
\$ /yr	Total C ENTER ZERO if none of C applies!	\$ /yr

****List names of children that child support was paid because of divorces or separation (if applicable). Do not include children listed on the front of this form under "family information".**

Check your parent(s)' housing status during most of last year (1/2006 - 12/2006):

Paid rent or mortgage payments Lived in Subsidized Housing Other _____
Please explain

What were the student's and parents' main sources of financial support during 2006 (**please check all that apply**)?

__ Income from work __ Student Financial Aid __ Child Support/Alimony __ Assistance from friends or relatives
 __ Food Stamps __ Legal Settlement __ WIC __ Savings __ Other (_____)

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

We certify that all the information reported on this worksheet is complete and correct. (**At least one parent must sign.**)

Student's Signature _____ Date _____ Parent's Signature _____ Date _____

Return promptly with 2006 tax information to:

Financial Assistance Department
 College of Southern Maryland
 P. O. Box 910, La Plata, MD 20646-0910
 Or fax to 301 934-7694