

2018-19 Independent Standard Verification



A. Independent Student Information (Please Print)

Last Name	First Name	SMCC ID#	Phone Number
Address		City	State Zip

B. Independent Student Family Information - List below the people in the your student's household

Full Name	Age	Relationship to Student	College	Will be Enrolled at Least Half Time (Yes or No)
Missy Jones (example)	18	Self	Southwest MS Comm. College	

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary education institution is inaccurate.

C. Independent Student Income Information to Be Verified

1) Tax Return Filers – Complete this section if the student and/or spouse filed or will file a 2016 IRS tax return.

IRS DRT was used to transfer 2016 income tax return
 2016 IRS Tax Return Transcript is attached to this form
 2016 IRS Tax Return Transcript will be provided later

2) Non Tax Return Filers – Complete this section if the student and/or spouse will not file and are not required to file a 2016 income tax return with the IRS.

Check the box that applies:

- The student and/or spouse were not employed and had no income earned from work in 2016.
- The student was employed in 2016 and has listed below the names of all employers, the amount earned from each employer in 2016, and whether an IRS W-2 form or an equivalent document is provided. **[Provide copies of all 2016 IRS W-2 forms issued to the student by their employers]. List every employer even if the employer did not issue an IRS W-2 form.**

Employer's Name	IRS W-2 Provided? (Yes or No)	2016 Amount Earned
Total Amount of Income Earned from work		\$

- Confirmation of non-filing statement from IRS is provided dated on or after Oct. 1, 2017.
- Confirmation of non-filing statement from IRS dated on or before Oct. 1, 2017 will be provided later.

1) Other Untaxed Income:

Section I – Do you receive any of the following benefits?

Free or Reduced Price Lunches at School Social Security Benefits SNAP WIC TANF Medicaid

Section II – Complete this section if the student and/or spouse **received Child Support**.

<i>Name of Person Who Receives the Support</i>	<i>Name of Child for Whom Support was Received</i>	<i>Amount of Child Support Received in 2016</i>

You may be asked to provide documentation supporting the payments listed above

Section III – Complete this section if the student and/or spouse **paid Child Support**.

<i>Name of Person Who Paid Child Support</i>	<i>Name of Person to Whom Child Support was Paid</i>	<i>Name of Child for Whom Support was Paid</i>	<i>Amount of Child Support Paid in 2016</i>

You may be asked to provide documentation supporting the payments listed above

Section IV - Complete this section if you have other untaxed income not listed above.

Name of Recipient	Type of Benefit Received	Annual Amount of Benefit Received in 2016

Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Print Student's Name _____ Student ID # _____

Student's Signature _____ Date _____

Spouse's Signature (Optional) _____ Date _____

Southwest Mississippi Community College does not discriminate on the basis of race, color, national origin, age, sex, religion, or disability in its programs, activities or employment practices. The following persons have been designated to handle inquiries and grievances regarding the non-discrimination policies: Mrs. Rhonda Gibson, Director of Disability Support Services, 601-276-3885; Dr. Brent Gregory, Vice President for Student Affairs and Title IX Coordinator, 601-276-3717; SMCC, 1156 College Drive, Summit, MS 39666.