## 2015-2016 V4 Custom Verification Worksheet



Student Financial Aid Office 11400 Robinwood Drive Hagerstown, MD 21742

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

Your application was selected for review in a process called "Verification." When a student's file is selected for verification, the Financial Aid Office must document and validate certain data elements from the FAFSA. The law says we must ask you for additional information before awarding Federal Aid and Maryland Grants or Scholarships. If there are differences between your application information and your financial documents, the Financial Aid Office may need to make corrections electronically, and you may receive a corrected Student Aid Report (SAR).

Instructions: Complete all pages of this verification form and submit it to HCC Student Financial Aid Office as soon as possible, so that your financial aid won't be delayed. Please contact us if you need any additional information to fill out this form.

Student Information					
				All address and phor	ne number
Last Name	First Name	MI		corrections should be WebAdvisor.	e made on
HCC ID Number					
Please answer all questi	ions below.				
	did anyone in the ram (SNAP) also			e benefits from the Supplemen amps?	tal Nutrition
☐ Stud	dent/Spouse	☐ Pa	rent	None	
In 2014 did anyo	ne in the househo	old PAY child	l suppo	ort?	
☐ Stud	dent/Spouse	☐ Pa	rent	□ None	
If yes – Comp	olete the chart be	low. (If you ne	eed mo	re space, attach a separate page	e.)
Name of the person who paid Child Support	Name of the chil		Age	Name of the person to whom you paid the support.	Amount paid in 2014
By signing this form you	ı are certifving th	nat all the in	forma	tion reported on it is comple	ete and correct.
	, , , , , , , , , , , , , , , , , , ,				
Student Signature	Date	Parent Signature (required for Dependent Student) Date			
				Office Use Only: DepInd	dInitial
-0.74				0/40/	4.5

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