

2019-2020 Independent Verification Worksheet



Student Financial Aid Office
11400 Robinwood Drive
Hagerstown, MD 21742

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FAX: 301-791-9165

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 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. Please fill out this form in your browser and then print and sign. We require ink signatures on this form. Please contact us if you need any additional information to fill out this form.

Step 1: Student Information

Last Name	First Name	MI	HCC Student ID number
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Dependency Status

I am an **INDEPENDENT** student.

My household will include:

- Yourself.
- Your **spouse**, if you are married.
- Your **children or your spouse's children**, if you and/or your spouse will provide more than half of the children's support from July 1, 2019, through June 30, 2020, even if the children do not live with you.
- Other people if they now live with you **and** you and/or your spouse provides more than half of the other people's support and will continue to provide more than half of their support through June 30, 2020.

Step 2: Household Size & Number in College

- List all the people whom you/your spouse support in the chart below.
- Also, include in the chart below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2019, and June 30, 2020, and **include the name of the college**.

If more space is needed, provide a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship	Attending College 6 credits or more? **
<i>(example) Martha Jones</i>	<i>24</i>	<i>wife</i>	<i>Hagerstown CC</i>
		Self	HCC

Notes about Household Size (if applicable):

Step 3: Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent (if applicable) whose information was reported on the FAFSA must sign and date.

Student Signature: _____ Date: