***Big Bend 2024 - 2025 V5***



**COMMUNITY COLLEGE *AGGREGATE VERIFICATION***

*Transforming lives through excellence in teaching* & *learning*

**STUDENT SERVICES – FINANCIAL AID**

**Return this form to:**

 **Student Administrative Support Services - Financial Aid • 7662 Chanute Street N.E. • Moses Lake, WA 98837-3299**

**Phone: 509.793.2088 • Fax: 1.888.820.2896 • Email:** **faidinfo@bigbend.edu** **•** [**https://www.bigbend.edu/student-center/financial-aid/**](https://www.bigbend.edu/student-center/financial-aid/)

**Your 2024-2025 application was selected for a review process called *Verification*.** In this process, the Financial Aid Office (FAO) will compare information from your FAFSA/WASFA with the information you provide on this worksheet and other required documents. The law says that before awarding Federal Student Aid we must complete this process and make any necessary corrections to your application. **Complete this form in pen. Incomplete worksheets will not be accepted.**

* If you used the IRS Data Exchange when submitting your FAFSA and did not make any recent changes, you still need to complete this worksheet but will not need to submit additional tax information (unless requested by Financial Aid Office).
* If you and/or your parent(s) – if dependent – cannot use the IRS Data Exchange, you must provide a **signed** and **dated** 2022 Tax Return OR IRS Tax Return Transcript. To request the Tax Return Transcript, go to [www.irs.gov](http://www.irs.gov) click on *Get Your Tax Record* and complete the directions.
* If you did not file a 2022 tax return, and are an independent student, you must provide a Verification of Non-filing Letter. If you are a dependent student and your parent(s) did not file a 2022 IRS Tax Return, you must provide a Verification of Non-filing Letter for your parent(s). To request this letter visit [www.irs.gov](http://www.irs.gov), click on *Get Your Tax Record*, and complete the directions OR complete and mail-in Form 4506-T (check box 7 on the form).

**A. Student Information**

Last Name First Name M.I. Social Security Number

Date of Birth Phone Number (including area code) ctcLink ID Number

**Please select only one box that applies below and complete the remainder of this form accordingly.**

[ ]  **I am a DEPENDENT student. You WERE required to provide parental information on the FAFSA.**

List the people in your legal parent(s)’ household including:

* yourself
* your legal parent(s) (including unmarried, adoptive and/or stepparent) even if you don’t live with them
* your legal parent’s other children if (a) your parents will provide more than half of their support from July 1, 2024 through June 30, 2025, or (b) the child would be required to provide parental information on the FAFSA, even if they do not live with your parent(s)
* other people if they now live with your legal parents and your legal parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2024 through June 30, 2025.

[ ]  **I am an INDEPENDENT student. You WERE NOT required to provide parental information on the FAFSA.**

List the people in your household including:

* yourself
* your spouse (if applicable)
* your children, if you will provide more than half of their support from July 1, 2024, through June 30, 2025 or if the child would be required to provide your information on the FAFSA, even if they do not live with you
* other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2024, through June 30, 2025.

**B. Family Information: List the people in your household below.**

List all family members in the table below based on the status you checked on the previous page (Dependent or Independent). Include the college name (if any) for any member listed who will be attending college in at least six credits between July 1, 2024 and June 30, 2025 (do not include Running Start). **If you have additional family members, please attach a separate page.**

| **Full Name** | **Age** | **Relationship** | **College** |
| --- | --- | --- | --- |
|  |  | Self | Big Bend Community College |
|  |  |  |  |
|  |  |  |  |
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**C. Student’s Tax and Income Information (all applicants)**

Select only one option below that applies:

[ ]  I used the IRS Data Exchange to submit my FAFSA.

[ ]  I am attaching a signed and dated copy of my 2022 Tax Return (please include Schedule 1, 2 and/or 3 that were filed with the 1040) or a copy of my IRS Return Transcript.

[ ]  I am an Independent student who will not file and am not required to file a 2022 U.S. Income Tax Return. I am attaching a copy of my 2022 IRS Verification of Non-filing Letter **OR** I am a Dependent student who will not file and am not required to file a 2022 Income Tax Return.

 [ ]  I earned $0 in income during 2022

[ ]  I worked in 2022 and have attached my W-2(s) for income earned from the following employer(s):

| **Employer Name** | **2022 Income** |
| --- | --- |
|  | $ |

**D. Legal Parent(s) or Spouse Tax and Income Information**

Select only one option below that applies:

[ ]  Your legal parent(s) or spouse used the IRS Data Exchange to submit your FAFSA.

[ ]  You are attaching a signed and dated copy of your legal parent(s)’ or spouse’s 2022 Tax Return (please include Schedule 1, 2 and/or 3 that were filed with the 1040) or copy of IRS Return Transcript.

[ ]  Your legal parent(s) or spouse will not file and are not required to file a 2022 U.S. Income Tax Return. You are attaching a copy of your parent(s)’ or spouse's 2022 IRS Verification of Non-filing Letter.

☐ My parent(s) or spouse earned $0 in income during 2022

☐ My parent(s) or spouse worked in 2022 and attached are their W-2(s) for income earned from the following employer(s):

| **Parent(s) / Spouse** | **Employer Name(s)**  | **2022 Income** |
| --- | --- | --- |
|  |  | $ |
|  |  | $ |

## E. Student Identity Verification & Statement of Educational Purpose:

*Select one option and complete.*

[ ]  I am appearing in person at the Big Bend Community College Financial Aid Office to verify my identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver’s license; other state issued ID; or U.S. passport. The institution will maintain a copy of the student’s photo ID that is annotated with the date it was received and the name of the official at the institution authorized to review the student’s ID. In addition, I must sign, in the presence of the institutional official, the following:

###  **Statement of Educational Purpose**

I certify that I, (print student’s name), am the individual signing this Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and
to pay the cost of attending (Name of Postsecondary Education Institution) for 2024-2025.

Student’s Signature Date FA Official’s Signature Date

[ ]  I am unable to appear in person at Big Bend Community College to verify my identity and provide the Statement of Educational Purpose. I understand I must attach a copy of the valid government-issued photo identification (ID), such as, but not limited to, a driver’s license; other state issued ID; or U.S. passport and provide the Statement of Educational Purpose that is acknowledged in the notary statement below. **NOTE: Any costs incurred acquiring a Notary Public will not be reimbursed by BBCC; original copy of the form must be mailed to the BBCC Financial Aid office if being notarized – no emailed forms will be accepted.**

###  **Statement of Educational Purpose**

I certify that I, (print student’s name), am the individual signing this Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for

educational purposes and to pay the cost of attending (Name of Postsecondary Education Institution) for 2024-2025.

Student’s Signature Date

### **Notary’s Certificate of Acknowledgement (Original hard copy must be mailed in – cannot be faxed)**

State of City/County of on

 (date), before me (notary’s

name)personally appeared (printed name of student), and

provided to me on basis of satisfactory evidence of identification (type of government-

issued photo ID provided) to be the above named person who signed the foregoing instrument.

WITNESS my hand and official seal:

Notary Public signature

My Commission expiration date

**F. Signatures**

Each person signing this form certifies that all the information provided in this application and other financial aid documents is true and correct. I declare that I have reviewed, understand and agree to the conditions, responsibilities and obligations in order to receive financial aid for the 2024-2025 academic year as stated in the Conditions of Award and Satisfactory Academic Progress Policy (available on the financial aid website). **The student and at least one legal parent (if a dependent) must sign and date.**

Student Signature Date Legal Parent or Spouse Date

*Big Bend Community College does not discriminate on the basis of race, color, national origin, sex, gender, disability, or age in its programs or activities. The following departments have been designated to handle inquiries regarding the non-discrimination policies: Title IX Coordinator, Building 1400, Office 1449 at (509)793-2010 /* *HRoffice@bigbend.edu* *or Accommodation and Accessibility Services Coordinator, Building 1400, Office 1472 at (509)793-2027 /* *aas@bigbend.edu**.*