

RETURN TO:
SAN DIEGO MESA COLLEGE FINANCIAL AID
 7250 MESA COLLEGE DRIVE, 14-107
 SAN DIEGO, CA 92111-4998
 619.388.2817
 619.388.2824 [FAX]

2017–2018 Verification Worksheet

Independent Student

Household Size

Your 2017–2018 Free Application for Federal Student Aid (FAFSA) or California Dream Act application was selected for review in a process called “Verification.” The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. You have received this form due to your response on the FAFSA indicating that you have legal dependents other than your child or a spouse that live with you and are receiving more than 50% of their financial support from you. Based on your age and Federal Regulation you are considered a Dependent Student. To verify that you have provided correct information we will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet in PEN ONLY, attach any required documents, and submit the form and other required documents to the financial aid office. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

A. Student’s Information

Last Name	First Name	M.I.	CSID Number
Street Address (include apt. no.)			Date of Birth
City	State	Zip Code	Phone Number (include area code)

B. Student’s Family Information

List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2017, through June 30, 2018, or if the child would be required to provide your information if they were completing a FAFSA for 2017–2018. Include children who meet either of these standards, 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 through June 30, 2018.

Include the name of the college for any household member who 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, 2017, and June 30, 2018. *If more space is needed, attach a separate page.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
<i>Marty Jones(example)</i>	28	<i>Wife</i>	<i>Central University</i>	<i>Yes</i>
		Self	San Diego Mesa College	

C. Certification and Signature

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married and filing jointly, the spouse’s signature is optional. Additional Documents may still be required.

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

Student’s Signature	Date
Spouse’s Signature	Date

Submit this worksheet to the San Diego Mesa College Financial Aid Office