Randolph-Macon College
Ashland, Virginia

Office of Financial Aid
P. O. Box 5005, 114 College Avenue
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Office Use ONLY:

Reviewed by: _____

Date: _____/_____/_____

2013-2014 R-MC AGGREGATE VERIFICATION WORKSHEET – V5

STEP 1 – STUDENT INFORMATION

_____
Last Name *First Name* *R-MC Student ID Number*

_____
Permanent Address *Street Number* *City/State/Zip* *Date of Birth*

_____
Home Phone # (include Area Code) *Cell Phone # (include Area Code)* *E-mail address*

STEP 2 – FAMILY INFORMATION

If you are a **DEPENDENT STUDENT**, include:
1 Yourself
2 Your parent(s) (including step-parents) whose data is reported on the FAFSA
3 Your parent(s) other dependent children if a) your parent(s) will provide more than half of their support from July 1, 2013 through June 30, 2014, or b) the children would be required to provide parental information when applying for Federal Student Aid
4 Other people only if they now live in your parent(s) household and your parent(s) will provide more than half of their support from July 1, 2013 through June 30, 2014

If you are an **INDEPENDENT STUDENT**, include:
1 Yourself
2 Your spouse (if you are married)
3 Your children if you will provide more than half of their support from July 1, 2013 through June 30, 2014
4 Other people only if they live in your household and you provide more than half of their support and will continue to do so from July 1, 2013 through June 30, 2014

Full Name	Age	Relationship to Applicant	Name of College/Degree Program (i.e. BA, BS) (if at least half-time 2013-2014)	Enrolled at least Half-time (YES or NO)
		SELF	R-MC/	

(Attach and additional sheet if you need more space)

STEP 3 – SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) BENEFITS – CALENDAR YEAR 2011 OR 2012

Did anyone listed in STEP 2 receive SNAP benefits during the calendar year 2011 or 2012?
_____ **YES** Attach documentation to show benefits were received during the calendar year 2011 or 2012. Continue to STEP 4.
_____ **NO** Continue to STEP 4.

STEP 4 – STUDENT TAX TRANSCRIPT & INCOME INFORMATION – CALENDAR YEAR 2012

Are you or will you be required to file a 2012 Federal Income Tax Return?

_____ **YES** Attach a copy of a Federal Tax Return Transcript from the IRS (*NOT a copy of Federal Tax Return or Tax Account Transcript*) **and** copies of all 2012 W-2 Statements. Continue to STEP 5.

_____ **NO** Complete the table below and attach copies of ALL 2012 W-2 forms and continue to STEP 5.

Source of Income (Fill out only if you did NOT file taxes)	Amount Earned In 2012
TOTAL	

STEP 5 – SPOUSE OR PARENT TAX TRANSCRIPT & INCOME INFORMATION – CALENDAR YEAR 2012

Are you or will you be required to file a 2012 Federal Income Tax Return?

_____ **YES** Attach a copy of a Federal Tax Return Transcript (with your student's name written at the top) from the IRS (*NOT a copy of Federal Tax Return or Tax Account Transcript*) **and** copies of all 2012 W-2 Statements. Continue to STEP 6.

_____ **NO** Complete the table below **and** attach copies of ALL 2012 W-2 forms and continue to STEP 6.

Source of Income (Fill out only if you did NOT file taxes)	Amount Earned In 2012
TOTAL	

PLEASE NOTE: We cannot accept a signed copy of the tax return. To request a Tax Return Transcript or a "W-2 Wage Summary" (if you did not keep a copy of your W-2 form) *call the IRS at (800) 908-9946. Please be advised that it may take a minimum of three weeks for the IRS to mail these documents to you or if you have not already done so, you may use the IRS Retrieval Tool from FAFSA.gov to transfer your tax information to your FAFSA.*

STEP 6 – CHILD SUPPORT PAID

One of the parents included in the household or the student paid child support in 2012. List below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2012 for each child.

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

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support was Paid	Total Annual Amount of Child Support Paid in 2012

PLEASE NOTE: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation.

STEP 7 – HIGH SCHOOL COMPLETION STATUS

NEW STUDENTS: You must provide our Admissions Office a copy of your final High School Transcript showing the date your diploma was awarded, if you have not already done so.

RETURNING STUDENTS: If you have not provided our Admissions Office with a copy of your final High School Transcript showing the date your diploma was awarded, you must provide us with a copy before we can continue to process your financial aid request.

STEP 8 – IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE (To be signed with Notary)

If the student is unable to appear in person at _____
(Name of Postsecondary Educational Institution)
to verify his or her identity, the student must provide:

(a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport; **AND**

(b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of
(Print Student's Name)
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 Educational Institution)

_____ _____
(Student's Signature) (Date)

_____
(Student's ID Number)

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,
(Date) (Notary's Name)

personally appeared, _____, and provided to me on basis of
(Printed Name of Signer)

satisfactory evidence of identification _____ to be the above-named person
(Type of Government-Issued Phone ID Provided)

who signed the foregoing instrument.

WITNESS my hand and official seal _____
(Seal) (Notary Signature)

My commission expires on _____
(Date)

STEP 9 – CERTIFICATION: By signing this worksheet, I (we) certify all the information reported is complete and correct, and I (we) understand that this worksheet is considered incomplete without the requested appropriate documentations. We must have original signatures on this worksheet, thus you can only mail or bring it into our office:

_____
Student Signature *Date* *Student Name (Please Print)* *R-MC Student ID #*

_____
*Parent Signature (**IF** Student is dependent)/Spouse Signature (**IF** Student is married)* *Date* *Parent/Spouse Name (Please Print)*

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