



**2016-2017
California Dream Act
Verification Worksheet**

**Independent Student
(F17CAIV1)**

Your 2016–2017 California Dream Act Application was selected for review in a process called verification. We may ask you to confirm the information you reported on your Dream Act Application. To verify that you provided correct information the financial aid administrator at your school will compare your application with the information on this worksheet and with any other required documents. If there are differences, your application information may need to be corrected.

You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

A. Independent Student’s Information

Student’s Last Name	Student’s First Name	Student’s M.I.	Student’s MiraCosta ID Number
Student’s Street Address (include apt. no.)			Student’s Date of Birth
City	State	Zip Code	Student’s Email Address
Student’s Phone Number (include area code)			Student’s Alternate or Cell Phone Number

B. Independent Student’s Family Information

Clarification is needed for the total number of people reported in your household for the 2016-17 aid year.

List all people in your household. Include:

- Yourself (and your spouse).
- Your children, if you will provide more than half of their support and you will continue to provide more than half of their support between July 1, 2016 and June 30, 2017.
- Other people if they now live with you and you provide more than half of their support and will contribute to provide more than half of their support through June 30, 2017.

**Shared living arrangement (i.e. roommate) is not the same as “support.” Support means: currently providing more than half of all living expenses for that person because that person listed has no means of self-support, or no one else is providing at least half of their support.*

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 a postsecondary educational institution any time between July 1, 2016 and June 30, 2017.

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>
		<i>Self</i>		

If more space is needed, attach a separate page with the student’s name and student’s MiraCosta ID Number at the top.



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NOTE: CAIV1

C. Independent Student's Income Information to Be Verified

1. Check the box that applies:

- I have filed my 2015 Federal Tax Return and I am attaching a copy of my 2015 Tax Return Transcript.*
- I worked but I did not file a 2015 Federal Tax Return, and am not required to file a 2015 Federal Tax Return. I have attached W-2 forms or other earnings statements from each employer.*
- I did not file and am not required to file a 2015 Federal Tax Return because I did not work and did not earn income.

2. List all sources of untaxed income received during 2015 (include untaxed pensions, child support received, workers' compensation, etc.)

DO NOT LEAVE THIS SECTION BLANK, IF NOT APPLICABLE PLEASE ENTER "0"

Sources of Untaxed Income	2015 Amount	Sources of Untaxed Income	2015 Amount
	\$		\$
	\$		\$
	\$		\$

D. Spouse's Income Information to Be Verified (If married)

1. Check the box that applies:

- I have filed my 2015 Federal Tax Return and I am attaching a copy of my 2015 Tax Return Transcript.*
- I worked but I did not file a 2015 Federal Tax Return and am not required to file a 2015 Federal Tax Return. I have attached W-2 forms or other earnings statements from each employer.*
- I did not file and am not required to file a 2015 Federal Tax Return because I did not work and did not earn income.

2. List all sources of untaxed income received during 2015 (include untaxed pensions, child support received, workers' compensation, etc.)

DO NOT LEAVE THIS SECTION BLANK, IF NOT APPLICABLE PLEASE ENTER "0"

Sources of Untaxed Income	2015 Amount	Sources of Untaxed Income	2015 Amount
	\$		\$
	\$		\$
	\$		\$

**We cannot accept copies of income tax returns; however, a copy of your IRS Tax Return Transcript is allowable. To obtain an IRS tax return transcript, go to www.irs.gov and click on "Get a Tax Transcript" link, or call 1-800-908-9946. Make sure to request the "IRS tax return transcript" and not the "IRS tax account transcript." You can also request a W-2 statement from the IRS.*

E. 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, the spouse's signature is optional.

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 (optional)

Date

Do not mail this worksheet to the California Student Aid Commission. Submit this worksheet to the financial aid administrator at your school. You should make a copy of this worksheet for your records.