

Enter your JCC ID: J00 _____
FA 1819 AVRI



INDEPENDENT VERIFICATION

Your federal aid application (FAFSA) was selected for a review process called “verification.” The financial aid office will compare your FAFSA with the information on this form and make any necessary corrections to your FAFSA using the information you provide. *Federal regulations give the financial aid office authority to request this information before awarding federal aid (34 CFR, Part 668). This includes Federal Direct Student & Parent (PLUS) loans.*

1. Complete and submit this form, with any other required documents, to the financial aid office. Read the instructions carefully and attach all required documentation to avoid unnecessary delays in processing your financial aid.
2. **Refer to “Your Eligibility Requirements” on the Financial Aid tab in your Banner account or your JCC Request for Information (RFI) letter** to determine what you must submit with this Verification Form. After a financial aid representative reviews your information you could be asked to submit additional documentation.
3. **Do not make changes to your FAFSA at this time unless you are advised to do so by the financial aid office.**

Student Information

Student’s name (First, MI, Last)		Student’s Phone#	
Street address	City	State	Zip code

Family Information: List the name and age of all household members as defined below. Also include the name of the college for any household member who will be enrolled at least half time in an undergraduate degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2018 and June 30, 2019.

Who should be included in household?

- Yourself and your spouse, if married
- Your children if you will provide more than half of their support from July 1, 2018, through June 30, 2019 even if they do not live with you.
- Other people if they live with you now and will continue to live with you from July 1, 2018 through June 30, 2019 and you will continue to provide more than half of their support through June 30, 2019.
- **Do NOT leave age and relationship of household members blank.**

Full name of each household member	Age	Relationship to student	Attending College	Name of college If attending at least half-time in 2018-19
		<i>I am the student</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Jamestown Community College</i>
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Check this box and attach a separate page with student’s name and JCC ID number at the top if more space is needed.

Certification: *I certify that all information provided in this document is true, complete and accurate. I understand that if I purposely give false or misleading information, I may be fined, sentenced to jail or both.*

Student signature: _____ Date: _____

JCC Financial Aid Office | PO Box 20 | Jamestown, NY 14702-0020
Jamestown 716.338.1009 | 1.800.388.8557 ext. 1009 | Olean 716.376.7512 | 1.800.388.8557 ext. 7512 | FAX 716.338.1459