



Financial Aid Office
2019-2020 Verification Worksheet
Dependent Student (DV1A)

Name _____

BHC ID _____

A. List below the people in the parents' household:

- Include **yourself**,
- Include **your parent(s)**, even if you do not live with them:
 - *If your parents are divorced*, list the parent you lived with the most during the last 12 months. If you did not live with one parent more than the other, indicate the parent who provided more than half of your support during the last twelve months.
 - *If your parent is remarried*, include your stepparent.
 - *If your parents are unmarried and living together*, list both parents.
- Include your **parent(s)' other children** if the parent(s) will provide more than half of their support from July 1, 2019 through June 30, 2020 or if the other children would be required to provide parental information if they were completing an FAFSA for 2019-2020. Include children who meet either of these standards, even if the child does not live with the parent(s).
- Include **other dependents** if they now live with your parent(s) and your parent(s) provide, and will continue to provide, more than half of their support through June 30, 2020.

Add the name of the college for any household member (excluding parents) who will be enrolled at least half time (6 credit hours per term) in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2019 and June 30, 2020, and include the name of the college.

Full Name	Age	Relationship	College	Will be enrolled at least half time	
				YES	NO
		<i>Self</i>	<i>Black Hawk College</i>	YES	NO
		<i>Parent/Step-Parent 1</i>		YES	NO
		<i>Parent/Step-Parent 2</i>		YES	NO
				YES	NO
				YES	NO
				YES	NO

NOTE: If your parent will enroll at least half time between July 1, 2019 and June 30, 2020, consider submitting *2019-20 Parent in College* documentation for consideration (www.bhc.edu/financial-aid-forms).

B. STUDENT Income to be Verified

Please check one of the following and submit the required documentation.

- I **did file** a 2017 federal tax return and used the IRS Data Retrieval Tool on the FAFSA to provide income information. *Date used:* _____

- I **did file** a 2017 federal tax return and have attached **one** of the following:
 - o A **signed** copy of my 2017 Federal 1040 tax form submitted to the IRS, or
 - o A 2017 IRS Tax Return Transcript*
- I **did not file** a 2017 federal tax return, but I **was** employed in 2017 and have attached copies of **all** 2017 W-2 and 1099 forms.
- I **did not file** a 2017 federal tax return because I **was not** employed and had no income earned from work in 2017.

C. PARENT Income to be Verified

Please check one of the following and submit the required documentation. **NOTE: If your parent has married since 2017, submit copies of 2017 tax documents for both your parent and stepparent.**

- My Parent(s) **did file** a 2017 federal tax return and used the IRS Data Retrieval Tool on the FAFSA to provide income information. *Date used:* _____
- My Parent(s) **did file** a 2017 federal tax return and have attached one of the following:
 - o A **signed** copy of their 2017 Federal 1040 tax form submitted to the IRS, or
 - o A 2017 IRS Tax Return Transcript*
- My Parent(s) **did not file** a 2017 federal tax return, but **were** employed in 2017 and have attached copies of **all** 2017 W-2 and 1099 forms **and** a Verification of Non-Filing letter* from the IRS for **each** parent.
- My Parent(s) **did not file** a 2017 federal tax return because they **were not** employed and had no income earned from work in 2017. They are attaching a Verification of Non-Filing letter* from the IRS for **each** parent.

*** To request a Tax Return Transcript or Verification of Non-Filing letter from the IRS, visit:**
www.irs.gov/get-transcript

Additional instructions can be found at:
www.bhc.edu/financial-aid-forms

D. Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date. **WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

Student Signature _____ Date _____

Parent Signature _____ Date _____

Return to: **Black Hawk College Financial Aid Office 6600 34th Avenue Moline, IL 61265**
Fax: 309-796-5447 Email: grants@bhc.edu