

COMPLETE SECTIONS A-F and attach any applicable documentation. You and one parent listed on FAFSA must sign this worksheet. Appear in person at the school with your valid, government-issued photo ID (Military ID is not acceptable for this form) and sign the Educational Purpose Statement in the presence of a Financial Aid staff member OR appear in person before a Certified Notary of the Public and show them your valid, government-issued photo ID (Military ID is NOT acceptable for this form) AND sign the Educational Purpose Statement in the presence of the Certified Notary of the Public. Mail the original worksheet with original signatures to the Financial Aid Office with a Notary Certificate of Acknowledgement. The Financial Aid Office cannot process your application without this information.

FEDERAL STUDENT AID PROGRAMS: Your application was selected for review in a process called "Verification." In this process, the Financial Aid Office compares information from your FAFSA application with your and your parent(s) financial documents. We are required to review your FAFSA information under financial aid program rules (34 CFR, Part 668). The law says we have the right to ask you for this information before awarding Federal aid. If there are differences between your application information and your financial documents, corrections to your FAFSA may be required.

A: STUDENT INFORMATION

Last Name:	First Name:	Middle Initial:
Social Security #:	ctcLink ID #:	DOB:

B: FAMILY INFORMATION: List the people in your household in the table below. Include:

- ☒ Yourself
- ☒ Your parent(s) (including stepparent) even if you don't live with them
- ☒ Your parents' other dependent (under age 24) children, even if they don't live with your parent(s), if your parents will provide more than half of their support from July 1, 2022 through June 30, 2023.

Include other people as part of your parents' household ONLY IF:

- ☒ They now live with your parents, **AND** your parents provide more than half of their support **AND** will continue to provide more than half of their support from July 1, 2022 through June 30, 2023. Documentation may be required.

Number in College: Please include in the College Attending column below information about any household member, excluding the parents, who is, or 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, 2022, and June 30, 2023, include the name of the college. If more space is needed, provide a separate page with the student's name and ID number at the top. **NOTE:** We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institution is inaccurate.

Full Name	Age	Relationship	College Attending
		Self (student)	Bellevue College

C: STUDENT AND PARENT INCOME INFORMATION TO BE VERIFIED

1. TAX RETURN FILERS

Complete this section if the student and/or parent filed or will file a 2020 IRS income tax return(s). The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the Web at <https://studentaid.gov>. In most cases, no further documentation is needed to verify 2020 income information that was transferred into the student's FAFSA using the IRS DRT if that information was not changed by the FAFSA filer.

Student:

- ☐ I used the IRS Data Retrieval Tool on the FAFSA. If you used the IRS Data Retrieval Tool, *and did not change the information*, you do not need to submit a Tax Return Transcript.
- ☐ I am attaching my 2020 IRS Tax Return Transcript **OR** a signed copy of my 2020 income tax return that was filed with the IRS.
- ☐ I filed an amended 2020 Tax Return. You must submit your 2020 Tax Transcript or 2020 signed income tax return **AND** a signed copy of your 1040X.

Parent:

- ☐ I used the IRS Data Retrieval Tool on the FAFSA. If you used the IRS Data Retrieval Tool, *and did not change the information*, you do not need to submit a Tax Return Transcript.
- ☐ I am attaching my 2020 IRS Tax Return Transcript **OR** a signed copy of my 2020 income tax return that was filed with the IRS.
- ☐ I filed an amended 2020 Tax Return. You must submit your 2020 Tax Transcript or 2020 signed income tax return **AND** a signed copy of your 1040X.

2. NON-TAX FILERS

Complete this section if the parent will not file and is not required to file a 2020 income tax return with the IRS. **Parents must include a verification of non-filing letter from the IRS.** This form may be obtained by completing an IRS Form 4506-T and checking box 7.

Student:

- ☐ I did not file a 2020 Tax Return and did not have earnings in 2020.
- ☐ I did not file a 2020 Tax Return **AND** I am not required to file a Tax Return. If you select this option, list your employer(s) and income earned and attach W-2s.

Student Employer	Student Earning/Income
	\$
	\$

Parent:

- ☐ I did not file a 2020 Tax Return and did not have earnings in 2020.
- ☐ I did not file a 2020 Tax Return **AND** I am not required to file a Tax Return. If you select this option, list your employer(s) and income earned and attach W-2s. You must also provide documentation from the IRS or other relevant tax authority dated on or after October 1, 2021 that indicates a 2020 IRS income tax return was not filed with the IRS or other relevant tax authority. Documentation includes a verification of non-filing letter from the IRS. This form may be obtained by completing an IRS Form 4506-T and checking box 7.

Parent Employer	Parent Earning/Income
	\$
	\$

D: REQUIRED SIGNATURES

I affirm that the information provided in this application and other financial aid documents is true and correct to the best of my knowledge. I agree that I have reviewed, understand and agree to the conditions, responsibilities and obligations in order to receive financial aid for the 2022-2023 academic year as stated in the Conditions of Award and Satisfactory Academic Progress Policy, available on the Financial Aid website.

Student Signature:	Date:
Parent Signature:	Date:

Bellevue College Financial Aid Office • 3000 Landerholm Circle SE • Bellevue, WA 98007-6484
(425) 564-2227 • www.bellevuecollege.edu/fa

Bellevue College does not discriminate on the basis of race, color, national origin, language, ethnicity, religion, veteran status, sex, sexual orientation, including gender identity or expression, disability, or age in its programs and activities. Please see policy 4150 at www.bellevuecollege.edu/policies/. The following people have been designated to handle inquiries regarding nondiscrimination policies: Title IX Coordinator, 425-564-2641, Office C227, and EEOC/504 Compliance Officer, 425-564-2178, Office B126.

E: EDUCATIONAL PURPOSE

Completion of this section **MUST BE WITNESSED BY A FINANCIAL AID STAFF MEMBER.**

If the student is unable to appear in person at Bellevue College 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 (Military ID is **NOT** acceptable for this form);

AND

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

Statement of Educational Purpose:

I certify that I, _____ (*print first and last name*) am the individual signing this Statement of 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 Bellevue College for the 2022-2023 school year.

Student Signature:	ctcLink ID #:	Date:
Witnessing Financial Aid Staff Member's Signature:		Date:

F: NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT (*original hard copy must be mailed in – cannot be faxed*)

Only applicable if student is not able to appear in person with government issued ID to Financial Aid Office.

State of _____, City/County of _____
on _____ (*date*), before me, _____ (*notary's name*),
personally appeared, _____ (*printed name of signer*), and provided to me on
basis of satisfactory evidence of identification _____ (*type of government-
issued photo ID provided*) to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal _____ (*notary signature*)

My commission expires on _____ (*date*).

Place seal here.

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