



Office of Financial Aid

2026-2027 DEPENDENT VERIFICATION WORKSHEET

Your 2026-2027 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information BCCC will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the Financial Aid Office. We may need to ask for additional information in the future. If you have questions about verification, contact our office as soon as possible so that your financial aid will not be delayed.

STUDENT INFORMATION

Please complete this verification form and provide copies of all requested paperwork.

Student's Last Name

First Name

Banner ID Number

Permanent Home Address (include apartment number)

Date of Birth

City

State

Zip Code

Student's Cell Phone Number

FAMILY INFORMATION

Please list all members of your household. Remember to include:

- Yourself
- Your parents, even if you are not living with them. Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces apart from the family.
- Your parent(s)' other children if the following are true:
 - They live with your parents (or live apart because of college enrollment),
 - They receive more than half of their support from your parents, and
 - They will continue to receive more than half of their support from your parents during the award year.
- Other persons if the following are true:
 - They live with your parents,
 - They receive more than half of their support from your parents, and
 - They will continue to receive more than half of their support from your parents during the award year.

The provided criteria for "dependent children" or "other persons" align with the requirement that family size align with whom the parent could claim as a dependent on a U.S. tax return if the parent were to file a U.S tax return at the time of completing the 2026-2027 FAFSA. As a result, the parent should not include any unborn children in the family size. Support is defined as providing food, housing, medical/dental care or health insurance, money or other financial resources. If you need more space, attach a separate sheet.

FULL NAME	AGE	RELATIONSHIP
		<i>Self</i>

STUDENT 2024 INCOME

Please choose a scenario:

☐ I have consented to use the Direct Data Exchange (DDX) on the FAFSA to retrieve and transfer 2024 IRS income information into my FAFSA, either on the initial FAFSA or when making a correction to the FAFSA OR will provide the institution with a 2024 IRS Tax Return Transcript or a signed copy of the 2024 income tax return and applicable schedules. (If you select this box you do not need to list income below.)

☐ I was not employed and had no income earned from work in 2024.

☐ I was employed during 2024, but was not required to file a 2024 federal tax return.

- Must submit W-2 forms for each employer.
- List below the names of all employers and the amount earned from each employer.

EMPLOYER NAME	STUDENT AMOUNT	IRS W-2 ATTACHED? (YES/NO)
	\$	
	\$	
	\$	

PARENT 2024 INCOME

Please choose a scenario:

☐ My parent(s) consented to use the Direct Data Exchange (DDX) on the FAFSA to retrieve and transfer 2024 IRS income information into my FAFSA, either on the initial FAFSA or when making a correction to the FAFSA OR will provide the institution with a 2024 IRS Tax Return Transcript or a signed copy of the 2024 income tax return and applicable schedules. (If you select this box you do not need to list income below.)

My parent(s) was/were not employed and had no income earned from work in 2024.

☐ My parent(s) was/were employed during 2024, but was/were not required to file a 2024 federal tax return.

- Must submit W-2 forms for each employer or 1099-MISC.
- List below the names of all employers and the amount earned from each employer.

EMPLOYER NAME	PARENT 1 AMOUNT	PARENT 2 AMOUNT	IRS W-2 ATTACHED? (YES/NO)
	\$	\$	
	\$	\$	
	\$	\$	

CERTIFICATION AND SIGNATURES

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date this worksheet.

Student's Signature

Date

Parent Signature

Date

WARNING: If you purposely give false or misleading information you may be fined, sent to prison, or both. Please make sure that you include all income sources and amounts that you receive.

Do not mail this worksheet to the U.S. Dept. of Education.

You must upload the documents online within fourteen days using the following link <https://BCCC.verifcationgateway.org>.

If you have questions, contact the Office of Financial aid via email financialaid@bccc.edu or phone 410-462-8333.