

Office of Financial Aid 500 College Drive Lake Jackson, TX 77566
 Phone: 979-230-3377 Fax: 979-230-3543 Email: Finaid@brazosport.edu
Student's Printed Name: _____ **BC Student ID:** _____

The income you reported on your 2014-2015 FAFSA appears to be low in comparison to the number of family members that you reported. The federal government requires that we verify how you were able to live on the income you reported. The student should review each question carefully and mark the appropriate answer. Please provide all additional documentation, if indicated below, when submitting this form. This form is required, in addition to the other necessary documents, in order for your Brazosport College Financial Aid file to be considered complete.

HOUSEHOLD VERIFICATION

List all persons in the household listed on the 2014- 2015 FAFSA

Independent students will include:

- The student
- The student's spouse, if applicable
- The student's or spouse's children
- Other people if they now live with the student and half of their support is being provided by the student's household.

Dependent Student will include:

- The student
- The student's parent 1 & parent 2
- The student's siblings
- Other people if they now live with the parent and half of their support is being provided by the parent's household.

Student Name	Age		College	
		<i>Self</i>	<i>Brazosport College</i>	
Full Name	Age	Relationship To Student	College	Will be Enrolled at Least Half Time (Yes or No)

CHILD SUPPORT VERIFICATION

Note: We will **REQUIRE** a printout showing all payments paid and/or received from January 1 – December 31, 2013. Documentation may be obtained from visiting <https://childsupport.oag.state.tx.us/wps/portal/csi>. If child support is not paid through the attorney general, a statement from the individual receiving the child support certifying the amount of child support received may be accepted.

Name of Person Who RECEIVED Child Support	Name of Person Who PAID Child Support	Name of Child(ren) for Whom Support Was RECEIVED/PAID	TOTAL Amount of Child Support RECEIVED/PAID in 2013

 No one in my household received and/or paid child support in 2013.

Student Name: _____

Student ID: _____

UNTAXED INCOME VERIFICATION

- LIST AMOUNTS BELOW IF APPLICABLE

Student and/or Spouse	Untaxed Income	Parent (if dependent)
	Payment to tax deferred pension and retirement plan- (Including but not limited to amounts reported on the W-2 form in boxes 12a through 12d, codes d, e, f,g ,h and s Not DD)	
	Housing, food, and other living allowances paid to members of the military, clergy, and others	
	Veterans NON-education benefits (including disability, death pension, DIC)	

HOUSEHOLD RESOURCES VERIFICATION

Student Living Expenses	Expenses (List the <u>average</u> monthly amount paid January 1, 2013 to December 31, 2013)	Person who paid the bill	Total yearly amount paid
Housing (Mortgage, Rent, Subsidized Housing)			
Utilities (Electric, Gas, Water)			
Food (Groceries)			
Auto (including auto insurance)			
Phone (cell, home, internet)			
Childcare (Daycare)			
Other			

SIGNATURE(S) REQUIRED

I hereby certify that the information I have provided is complete and correct. I understand that if I fail to provide accurate information, I may be required to reimburse the institution and penalties may be imposed.

Student Signature

Date

Parent Signature (if dependent)

Date