Lakeland ID Number (LID) | 0 | 0 | | | | | |

A. Student Information

Last Name: _____   First Name: _____

Phone Number: (_____) _____

Your Free Application for Federal Student Aid (FAFSA) was selected for a process called "Verification" which compares information from your FAFSA with applicable 2020 federal tax information and/or other financial documents. Based on this review, Lakeland may need to make corrections to your FAFSA. Verification must be completed by September 8, 2023, or 120 days after your last date of enrollment for 2022-2023, whichever is earlier. Financial aid will not be disbursed until the verification process is complete. Additional documentation may be requested if we have reason to believe any of the information is inaccurate. Lakeland must review the requested information under the financial aid program rules (34-CFR, Part 668).

Complete this form and return:*

By Fax:	440.525.7704			
By Mail:	Lakeland Community College	•	7700 Clocktower Drive	• Kirtland, OH 44094-5198
By Secure Upload:	Visit lakelandcc.edu/financialaid	•	Under Related LINKS (right side of page), select Financial Aid Documents Secure Upload link	
In Person:	Lakeland Student Service Center	•	located in Building A-1003	

*Please do not send documents through email as it is not a secure format.

B. Household Information

On my FAFSA, I listed _____ (number) people in my household supported by my parent(s) or myself (and spouse).

List everyone who receives more than 50% support from you (and your spouse) or your parent(s) as follows:
- **Independent Student: List yourself, your spouse & children.**
- **Dependent Student: List yourself, your parent(s) (even if you don't live with them) & siblings.**

Name	Age	Relationship to student	If enrolled in college at least half-time in 2022-2023, include the name of the college, otherwise leave blank
		Self	Lakeland Community College

Others in your household: Provide the following information for others in your household if you (and your spouse), or your parent(s) are providing more than 50% of their support.

Name	Age	Relationship to student	If enrolled in college at least half-time in 2022-2023, include the name of the college, otherwise leave blank	Dates this person will live with you between July 1, 2022 and June 30, 2023	List all resources you, your spouse or you parent(s) will use to support this person

C. 2020 Tax and Earnings Information

Tax Filers for 2020 - If you filed taxes for 2020, please carefully read and follow the information below.

- ☐ You <u>and</u> your spouse or you <u>and</u> your parent(s) used the Data Retrieval Tool (DRT) on the FAFSA.
  - Continue to section D.
- ☐ You, your spouse or parent(s) did not use the DRT; you must select one of the following options:
  - Log into your FASFA and transfer your IRS tax information using the DRT process. —**or**—
  - Go to IRS.gov or call IRS at 1.800.908.9946 and request a 2020 Tax Return Transcript. Once you receive the tax return transcript, submit it to the financial aid office.

Non-Tax Filers for 2020 - Complete this section if you did not file *and* were not required to file a 2020 federal income tax return.

Student and Spouse

☐ I/we was/were not employed and had no income earned from work in 2020.

☐ I/we was/were employed in 2020. I/we have attached copies of all 2020 W-2 forms issued to me and/or my spouse by employers.**

Parent(s), if applicable

☐ I/we was/were not employed and had no income earned from work in 2020.

☐ I/we was/were employed in 2020. I/we have attached copies of all 2020 W-2 forms issued to me and/or my spouse by employers.**

**If your employer did not issue a W-2, attach a signed statement listing your employer(s) and the amount earned in 2020.

Parent(s) and independent students (and spouse, if applicable) who did not file a tax return in 2020, each <u>MUST</u> submit a Verification of Non-filing letter from the IRS. To obtain this letter:

- Go to IRS.gov or call IRS at 1.800.908.9946 and request a Verification of Non-filing letter. Once the verification of non-filing letter is received, submit it to the financial aid office. *Include student's name and Lakeland ID number at the top of all documents submitted.*

D. Sign the Worksheet – If dependent, at least one parent must sign. **Electronic signatures cannot be accepted.**

With my signature below, I certify that all of the information reported on this form is compete and correct. **Warning: Purposely providing false or misleading information on this worksheet is punishable by fine and/or imprisonment.**

Student's Signature: _____ Date: _____

Parent's Signature (*for Dependent Students*): _____ Date: _____

_____*For Office Use Only*_____

Current EFC: _____	Transaction #: _____	**V1 * V5**
Sent for Corrections: ☐ Y ☐ N	Date Sent: _____	Initials: _____
Verified EFC: _____	Transaction #: _____	
Date Completed: _____	Initials: _____	