

**Southwestern Illinois College**  
**Office of Financial Aid, Veteran Services and Student Employment**  
 2500 Carlyle Avenue • Belleville, IL 62221-5899  
 866-942-SWIC (7942), ext. 5288 • 618-235-2700, ext. 5288 • Fax 618-235-3827

**2019-2020 Institutional Verification Form--Independent Student**

Your 2019–2020 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, SWIC is required to compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. **You must complete and sign this form, attach any required documents, and submit the form and other required documents to the financial aid office at SWIC.** If you have questions about verification, contact our office as soon as possible so that your financial aid will not be delayed.

**PLEASE NOTE:** If we have reason to believe any information is inaccurate, we may request additional documentation.

**A. INDEPENDENT STUDENT’S INFORMATION**

Student’s Last Name	Student’s First Name	Student’s M.I.	Student’s SWIC ID Number
Student’s Street Address (include apt. no.)		Student’s Date of Birth	
City	State	Zip Code	Student’s Phone Number

**B. HOUSEHOLD INFORMATION—For further guidance, see the 2019-2020 FAFSA instructions, or contact our office.**

List yourself.

Student’s Full Name	Relationship to student	College Name	State
	<b>SELF</b>	Southwestern Illinois College	IL

List spouse IF married and NOT separated. Only include college information for spouse if attending between 7-1-2019 and 6-30-2020.

Spouse’s Full Name	Age	Relationship to student	College Name	College State	Will enroll in college at least half-time? Yes/No
		<b>SPOUSE</b>			

\*List your children and your spouse’s children **IF** you (and/or your spouse, **IF** spouse was reported above) will provide more than half of their support through June 30, 2020. List other people **IF** living with you **AND** you (and/or your spouse, **if** listed above) will provide more than half of their support through June 30, 2020. (\*\*Complete the **last three college-related columns** for household members in this section **only if attending college between 7-1-2019 and 6-30-2020.**)

Full Names of <u>Other</u> * Household Members	Age	Relationship to student	**College Name	**College State	**Will enroll in college at least half-time? Yes/No

Student's Name: \_\_\_\_\_ SWIC ID Number: \_\_\_\_\_

**C. Active Duty Military Status for 2017** (If yes for more than one person, indicate that and provide information for each.)

- 1. Were you/spouse active duty military in 2017?  Yes  No
- 2. If 'Yes,' who was active duty military?  Student  Spouse
- 3. If 'Yes,' how many months in 2017 and what rank? \_\_\_\_\_ out of 12 months.  Enlisted  Officer

**D1. FILL OUT THIS SECTION ONLY IF YOU FILED A 2017 TAX RETURN.**

**IF YOU FILED A 2017 TAX RETURN**, read the selections below, and mark what you are or will be providing as tax documentation. The Data Retrieval Tool is the preferred method if you are able to use it. Visit <https://www.swic.edu/students/services/financial-aid/irs-tax-return-transcript-request/> for options to request an IRS tax return transcript if you did not and will not use the Data Retrieval Tool on the 2019-2020 FAFSA. If you **AMENDED** your 2017 tax return (made corrections after initial filing/filed a 1040X), contact our office for more information.

- I, the **student**, used the IRS Data Retrieval Tool for the 2019-2020 FAFSA.
- I, the **student**, will use the IRS Data Retrieval Tool for the 2019-2020 FAFSA later.
- I, the **student**, will not use the IRS Data Retrieval Tool for the 2019-2020 FAFSA.
- I will submit a **2017 IRS tax return transcript** or a **2017 signed federal tax return** now.
- I will submit a **2017 IRS tax return transcript** or a **2017 signed federal tax return** later.

**IF YOU ARE MARRIED AND FILED SEPARATE 2017 RETURNS:**

- We, **student and spouse**, filed **separate 2017 returns**.
- We will submit **2017 IRS tax return transcripts** or **2017 signed federal tax returns** for both of us.
- We will submit a 2017 IRS tax return or transcript for one person. The other person either wasn't employed or didn't earn enough to be required to file. For that person, we will submit all 2017 IRS W-2s if applicable, will report that person's income information in D2, below, and will provide an IRS non-filing letter.

**D2. FILL OUT THIS SECTION ONLY IF ONE OR BOTH OF YOU DID NOT FILE A 2017 TAX RETURN.**

**IF YOU/(YOUR SPOUSE) DID NOT FILE A 2017 TAX RETURN, AND WERE NOT REQUIRED TO, check the box(es) that apply:**

- I, the student, had no income earned from work in 2017.  My spouse, if applicable, had no income earned from work in 2017.
- One or both of us had income earned from work in 2017 and have listed ALL employer/income/W2 data below.
- I will submit all **2017 IRS W-2s** provided by employer(s) listed below, and also any 1099 forms received.
- I/(we) did not receive **2017 IRS W-2s** from employer(s) because \_\_\_\_\_.

Employee Name	Employer's Name	Annual Amount Earned in 2017	IRS W-2 Provided? Yes or No
		\$	
		\$	
		\$	
		\$	

**PLEASE NOTE: EACH non-filer is REQUIRED to also provide to us documentation from the IRS dated on or after 10-1-2018 that indicates a 2017 IRS income tax return was not filed. Request an IRS Verification of Non-filing Letter from the IRS. For request options and instructions, see <https://www.swic.edu/students/services/financial-aid/irs-verification-of-non-filing-letter/>. Your file cannot be processed without this non-filing letter. (If you have attempted to obtain it and were unable to, contact our office for assistance.)**

**E. CERTIFICATION AND SIGNATURE**

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. Falsification of information is subject to prosecution. **Original signatures required. No electronic signature of any form will be accepted.**

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_ Spouse's Signature (Optional) \_\_\_\_\_ Date \_\_\_\_\_