Your 2016–2017 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 reported on your FAFSA. To verify that you provided correct information, we 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 must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

Section A: Student Information

STUDENT NAME: ________________________________ MCC ID#: ________________________________

STREET ADDRESS: ____________________________________________

CITY: ___________________________ STATE: __________ ZIP: __________

HOME PHONE: ___________________________ CELL OR ALTERNATE PHONE NUMBER: ___________________________

STUDENT’S DATE OF BIRTH: ____________________ STUDENT’S EMAIL ADDRESS: __________________________

Section B: Additional information:

So that we can fully understand the student’s family’s financial situation, please provide below information about any other resources, benefits, and other amounts received in 2015 by the student and any members of the student’s household. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office, and include such things as Federal veterans education benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, Post-9/11 GI Bill. Also include: Military housing, SNAP, TANF, WIC, Untaxed Social Security Benefits, Section 8 Housing, Emergency Assistance Programs, Supplemental Security Income (SSI), Workforce Investment Act (WIA), etc.

If more space is needed, provide a separate page with the student’s name and ID number at the top.

<table>
<thead>
<tr>
<th>Name of Recipient</th>
<th>Type of Financial Support</th>
<th>Annual Amount of Financial Support Received in 2015</th>
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Total Amount of Financial Support Received in 2015 $

Explain your situation in regard to Food/Shelter/Transportation:

________________________________________________________________________________________
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Section C: Certification and Signatures

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA (if dependent) must sign and date.

________________________________________  ______________________
Print Student’s Name                      Student’s ID Number

________________________________________  ________________
Student’s Signature                       Date

________________________________________  ________________
Parent’s Signature                        Date

WARNING: If you purposely give false or misleading information you may be fined, sent to prison, or both.