

2020-2021 Form 5 – Dependent Applicant

Financial Aid Office
Bristol Community College 777 Elsbree Street Fall River, MA 02720

Your 2020-2021 Free Application for Federal Student Aid (FAFSA) was selected for verification. You must confirm the information you and your parents reported on your FAFSA. You and the parent with whom you completed the FAFSA must complete and sign this worksheet and submit the form and other required documents to the Financial Aid Office. Additional information may be requested once these documents are reviewed. If you have questions about verification, contact the Financial Aid Office.

An official high school (or high school equivalency) transcript is also required and must be submitted to the Financial Aid Office. This requirement is waived for applicants who have already submitted the official transcript to the Admissions Office.

900 _____ - _____ - _____ / ____ / ____ / _____
 Bristol ID number Social Security number Date of Birth

 Last Name First Name M. I.

 Street Address City State ZIP

 Home Phone Cell Phone

A. Family Information

List below the people in your parent(s)' household.
 Due to your dependent status include:

- Yourself
- Your parent(s) (including a stepparent) even if you don't live with your parent(s).
- Your parent(s) other children if your parent(s) will provide more than half of their support from July 1, 2020 through June 30, 2021, or if the other children would be required to provide parental information if they were completing a FAFSA for 2020-2021. Include children who meet either of these standards, even if they do not live with your parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2020.

WARNING If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Note: The parent with whom you completed the FAFSA should be the parent who provides his or her information and signature on this form.

Full Name	Age	Relationship	If attending college during 2020-2021, list name of college	Enrolled at least half time in college?
Example: Missy Jones	18	Sister	Central University	Yes
Enter student name in this box		Self	Bristol Community College	

Check here if one (or both) of your parents listed above **PAID OUT** child support in 2018 and complete the below chart.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support was Paid	Amount of Child Support Paid in 2018

Check here if one (or both) of your parents listed above **RECEIVED** child support in 2018 and complete the chart below.

Name of Person Who Received Child Support	Name of Child For Whom Support was Received	Amount of Child Support Received in 2018

B. Student Information to be Verified

Check the box that applies:

- I filed a 2018 Federal Tax Return (check the box that applies)
 - I have used the IRS Data Retrieval Tool at www.fafsa.gov (recommended)
 - I attached copies of my 2018 signed IRS 1040 Tax Return, applicable schedules, and W2s and/or 1099
 - I will request my 2018 Tax Return Transcript and submit it to the school by _____
- I filed an amended 2018 IRS tax return and will provide the following three documents **(Required)**:
 - (a) 2018 signed 1040 IRS Tax Return or IRS Tax Return Transcript
 - (b) a signed copy of 2018 1040X
- I worked in 2018, but I will not file a 2018 Federal Tax Return (complete the chart below)
Attached are copies of my 2018 W-2s and/or 1099 Forms **(Required)**

Use this chart to report all income you earned in 2018.		
Employer's Name	Amount earned in 2018	IRS W-2 Form attached?

- I did not work in 2018 and will not file a 2018 Federal Tax Return.

C. Parent Information to be Verified

If two parents were reported in Section A of this worksheet, the instructions and certifications below refer to both parents.

Check the box that applies:

- My parent(s) filed a 2018 Federal Tax Return (check the box that applies)
 - My parent(s) used the IRS Data Retrieval Tool at www.fafsa.gov (recommended)
 - My parent(s) have attached their signed IRS 1040 Tax Return, applicable schedules, and W2s and/or 1099
 - My parent(s) will request the 2018 Tax Return Transcript from the IRS and submit it by _____
- My parent(s) filed an amended 2018 Federal Tax Return and will provide the following three documents **(Required)**:
 - a. 2018 signed 1040 IRS Tax Return or IRS Tax Return Transcript
 - b. a signed copy of 2018 1040X
- My parent(s) worked in 2018, but will not file a 2018 Federal Tax Return and will provide the following documents:
 - (a) 2018 Verification of NonFiling Letter for each parent listed in Section A **(Required)**
 - (b) Copies of all 2018 W-2s and/or 1099 Forms **(Required)**

Use this chart to report all income you earned in 2018.		
Employer's Name	Amount earned in 2018	IRS W-2 Form attached?

- My parent(s) did not work and will not file a 2018 Federal Tax Return and will provide the following documents:
 - (a) 2018 Verification of NonFiling Letter for each parent listed in Section A **(Required)**

D. Parent Other Income

- Check here if someone in your parents' household (who is listed on the chart in Section A) received any of the following benefits in 2018 or 2019. Place a checkmark below indicating which benefits were received:
 ___SNAP (Food Stamps) ___TANF/TAFCDC/EAEDC ___Medicaid/SSI ___WIC ___Free or Reduced Lunch

E. Certification and Signatures Each person signing this form certifies that all information reported is complete and correct.

Student's Signature _____

Date _____

Parent's Signature _____

Date _____



Stop here and read directions below before proceeding

F. Statement of Educational Purpose and Identity

What you need to do:

- You must appear, in person, to verify your identity
- You must present a valid government-issued photo identification (ID) such as an unexpired driver's license, other state issued ID, or passport
- Call the office at 774-357-2515 to arrange to meet with a Financial Aid Office associate
- Do not complete this page until you are with a Financial Aid Office associate
- Complete either the English or Spanish version

Lo que debes hacer:

- Usted debe presentarse, en persona, para verificar su identidad
- Usted debe presentar identificación válida con foto emitida por el gobierno (ID) tal como una licencia vigente, otra identificación emitida por el estado (ID), o pasaporte
- Llame a la oficina de Ayuda Financiera (Financial Aid) al 774-357-2515 para hacer arreglos para reunirse con un Asociado de Ayuda Financiera
- No termine esta última sección hasta que este con un Asociado de Ayuda Financiera
- Completa la versión en Español o Inglés

Statement of Educational Purpose

I certify that I (print your name) _____,
am the individual signing this Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Bristol Community College for 2020-2021.

Student's Signature _____ Date _____
Student's ID Number _____

Declaración de Propósito Educativo

Certifico que yo, [Imprimir Nombre del Estudiante]

_____,
soy el individuo que firma esta Declaración de Propósito Educativo, y que la ayuda financiera federal estudiantil que yo pueda recibir sólo será utilizada para fines educativos y para pagar el costo de asistir a Bristol Community College para 2020-2021.

Firma del Estudiante _____ la Fecha _____
Número de identificación del estudiante _____

Financial Aid Office Associate:

1. Student must sign this statement in your presence
2. FAO associate must sign this form
3. FAO associate must photocopy ID, sign and indicate date received
4. FAO retains ID copy and this statement for processing

Financial Aid Associate Signature _____ Date _____