2024-2025 Parent SSN/TIN/EIN Certification

Your student's 2024-2025 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 must ask you to confirm the information reported on your student's FAFSA. To verify that the information is correct the financial aid administrator at Alamance Community College will compare your student's FAFSA with the information on this worksheet and with any other required documents. If there are differences, your student's 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 the financial aid administrator at Alamance Community College. Alamance Community College may ask for additional information. If you have questions about verification, contact the Financial Aid Office as soon as possible so that your student's financial aid will not be delayed.

| A. Student's Information | on | | | | |
|--|----------------------|----------------|-------------------------|--|--|
| Student's Last Name | Student's First Name | Student's M.I. | Stude | ent's Identification Number | |
| Student's Street Address (include apt. no.) | | | Student's Date of Birth | | |
| City | State | Zip Code | Student's Email Address | | |
| Student's Home Phone Number (include area code) | | | | Student's Alternate or Cell Phone Number | |
| B. Parent Sources of U | Intaxed Income: | | | | |
| Parent Sources of Untaxed Income | | | | 2022 Amount | |
| Child Support received | | | | \$ | |
| Workman's Compensation | | | | \$ | |
| Tax-deferred Pensions/Savings (W2 boxes 12a-12d, codes D,E,F,G,H and S) | | | | \$ | |
| Disability | | | | \$ | |
| Social Security/SSI Benefits | | | | \$ | |
| TANF/Work First | | | | \$ | |
| Money received, or paid on your behalf not reported elsewhere on this form | | | | \$ | |
| Other (Example: Section 8 housing assistance) | | | | \$ | |

| WARNING: If you purposely give false or misleading | | |
|---|--|--|
| WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be | | |
| sentenced to jail, or both. | | |
| y Number, an Individual Taxpayer Identification Number, or an come, and resources that supported the individual for the appropri | | |
| mployment income received for the appropriate tax year or an | | |
| the that equals or exceeds the IRS tax filing threshold must request ion Number, or an Employer Identification Number and file an itle IV aid. [Guidance issued 10/6/2016; and applies beginning with the IV aid in | | |
| | | |
| 1 | | |

Student's ID Number _____

Student's Name _____

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the financial aid administrator at your school.

You should make a copy of this worksheet for your records.