



ICC-Financial Assistance Office
 1 College Drive
 East Peoria, IL 61635-0001
 Phone: (309) 694-5311
 Fax: (309) 694-5160
 Email: financialaid@icc.edu

2018-2019 V-4 Independent Verification Worksheet

Your 2018-2019 Free Application for Federal Student Aid (FAFSA) was selected for a process called “verification”. In this process, we will compare the information from your application to the information on the form and other documentation that is submitted. The law states that before awarding Federal Student Aid, we may ask you to confirm the information you submitted on your FAFSA. If there are differences, we will make the required corrections. If we have any questions regarding the information you submitted to our office and on the FAFSA, we may ask for additional information.

You must complete this form in INK and submit it along with any other required documents to the ICC Financial Assistance Office.

A. Student Information:

Student Name (please print)

ICC Student ID#

Student Address

Date of Birth

City

State

Zip

Phone Number (include area code)

B. Independent Student’s Household Information:

Number of Household Members: List below the people in the student’s household. Include:

- ❖ The student.
- ❖ The student’s spouse, if the student is married.
- ❖ The student’s or spouse’s children if the student or spouse will provide more than half of the children’s support from July 1, 2018, through June 30, 2019, even if a child does not live with the student.
- ❖ Other people if they now live with the student and the student or spouse provides more than half of the other person’s support, and will continue to provide more than half of that person’s support through June 30, 2019.

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

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)
		<i>Self</i>	<i>Illinois Central College</i>	

Number in College: Include in the space below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2018, and June 30, 2019, and include the name of the college. **Note:** We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

C. Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

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

It is the policy of this college that no person, on the basis of race, color, religion, gender, national origin, age, disability, sexual orientation, or veteran's status, shall be discriminated against in employment, in educational programs and activities, or in admission. Inquiries and complaints may be addressed to the Compliance Office, Diversity Department

Print Student's Name

Student's ID Number

Student's Signature (Required)

Date

Spouse's Signature (Optional)

Date