

2010-2011 Institutional Verification Form (IVF) - Independent
Spartanburg Community College – Financial Aid Office
P.O. Box 4386, Spartanburg, S.C. 29305
Phone: (864) 592-4810 Toll Free: 1-888-591-3810 Fax: (864) 592-4945

Your 2010-2011 application for financial aid has been selected for verification. Submit the requested documentation detailed below as soon as possible. Processing of your financial aid file cannot continue, and no financial aid can be awarded until the required information has been received. The authority for SCC to review the requested documents can be found in CFR Title 34, Part 668.

STUDENT NAME: _____ **SSN:** _____

A. HOUSEHOLD INFORMATION

List below the people that you and/or your spouse (if married) will support between July 1, 2010, and June 30, 2011. Be sure to include yourself, your spouse and your dependent children. Include other people only if they lived with you and received more than half their support from you and/or your spouse at the time you applied for financial aid and will continue to receive this support between July 1, 2010, and June 30, 2011. In addition, provide the name of the university or college for family members who will be attending **at least half-time** during the 2010-2011 academic year and who will be enrolled in a degree, diploma or certificate program. Always list yourself.

Full Name of Family Member	Relationship to Student	Date of Birth (mm/dd/yy)	Age	Name of University or College Attending in 2010-2011

B. STUDENT’S TAX FORMS and INCOME INFORMATION

Taxable Income: *(Check #1 or # 2)*

- _____ Check if you filed or will file a 2009 federal income tax return. **A signed photocopy of IRS Form 1040/1040A/1040EZ and W2(s) must be returned with this form.** If you did not keep a copy of the return, contact the preparer or call the IRS at 1-800-829-1040 and request a tax return transcript and W2 information for 2009. Please sign the tax return transcript.
- _____ Check if you will not file and are not required to file a 2009 federal income tax return. Amount of earned income that you received in 2009 was \$_____. **Attach copies of all W2 forms.**

Child Support Paid:

_____ Check if you **paid** child support in 2009. List each child’s name for whom support was paid: _____

(You cannot include child support paid for a child listed as a member of your household in section A. Submit a record from the Clerk of Court’s Office of the amount of child support paid in 2009 for all children.)

Untaxed Income and Unemployment Benefits: *(All items must be answered. If you did not receive any of the following benefit sources, write in “0”.)*

Sources of Untaxed Income	Total Received in 2009	The Following Documentation Must Be Submitted
Child Support Received	\$	A record from the Clerk of Court’s Office of the amount of child support received in 2009 for <u>all</u> children.
Other Untaxed Income	\$	Record of source and amount for <u>any</u> untaxed income, including living allowances for military and clergy; veterans non-education benefits; Workman’s Compensation or disability.
Unemployment Benefits	\$	Submit a form 1099-G for unemployment compensation received in 2009.

