



2019-2020 Institutional Verification Form (IVF) - Independent

Your 2019-2020 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: _____ SCC ID / SSN: _____

Section 1: Household Information

List below the people that you and/or your spouse (if married) will support between July 1, 2019 and June 30, 2020. 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, 2019, and June 30, 2020. In addition, provide the name of the university or college for family members who will be attending **at least half-time** during the 2019-2020 academic year and who will be enrolled in a degree, diploma or certificate program. Always list yourself.

Full Name of Family Member	Relationship	Date of Birth (MM/DD/YY)	Age	Name of College	Will be Enrolled at Least Half Time	
					<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Self			Spartanburg Community College	<input type="checkbox"/> Yes	<input type="checkbox"/> No
					<input type="checkbox"/> Yes	<input type="checkbox"/> No
					<input type="checkbox"/> Yes	<input type="checkbox"/> No
					<input type="checkbox"/> Yes	<input type="checkbox"/> No
					<input type="checkbox"/> Yes	<input type="checkbox"/> No
					<input type="checkbox"/> Yes	<input type="checkbox"/> No
					<input type="checkbox"/> Yes	<input type="checkbox"/> No
					<input type="checkbox"/> Yes	<input type="checkbox"/> No

Section 2: Student's (and Spouse's, if married) Tax Return and Income Information

Important note: The instructions below apply to the student and spouse, if the student is married. Notify the financial aid office if the student or spouse filed separate IRS income tax returns for 2017 or had a change in marital status after December 31, 2017.

A. Tax Return Filers: (Check the ONE box that applies)

_____ I have used the IRS Data Retrieval Tool in FAFSA on the Web to retrieve and transfer my (and, if married, my spouse's) **2017** IRS income information. (SCC will use the IRS information that was transferred in the verification process, and you do not need to submit an IRS Tax Transcript.)

_____ I have not yet used the IRS Data Retrieval Tool in FAFSA on the Web, but will use the tool to retrieve and transfer my (and, if married, my spouse's) **2017** IRS income information. (SCC cannot complete the verification process until the IRS information has been transferred into the FAFSA.)

_____ I am unable or choose not to use the IRS Data Retrieval Tool in FAFSA on the Web, and I will submit a **2017 IRS tax return transcript**. **SCC cannot accept a photocopy of your income tax return.** If you are married and you and your spouse filed separate **2017** tax returns, you must submit a tax return transcript for both you and your spouse. (For detailed information about obtaining an IRS tax return transcript, go to www.sccsc.edu/FinancialAid/IRS.)

_____ Check here if your IRS tax return transcript is attached to this form.

If the student and spouse filed separate 2017 IRS income tax returns, the IRS DRT cannot be used and the **2017 IRS Tax Return Transcript(s)** must be provided for each.

_____ Check here if a **2017 IRS Tax Return Transcript(s)** is provided.

_____ Check here if a **2017 IRS Tax Return Transcript(s)** will be provided later.

Student (and Spouse, if married) Tax Return and Income Information Continued on Back

B. Tax Return Non-Fileers Statement:

_____ Check if you will not file and are not required to file a 2017 federal income tax return.

- Attach copy of W2 statement or an equivalent document for each source of employment income received.
- List amount earned from work: _____
- List amount earned from other sources:

EMPLOYER'S NAME	AMOUNT EARNED 2017	W-2 ATTACHED (Y/N)	STUDENT OR SPOUSE

_____ Check if your spouse will not file and is not required to file a 2017 federal income tax return.

- Attach copy of W2 statement or an equivalent document for each source of employment income received.
- List amount earned from work: _____
- List amount earned from other sources:

EMPLOYER'S NAME	AMOUNT EARNED 2017	W-2 ATTACHED (Y/N)	STUDENT OR SPOUSE

Provide documentation from the IRS or other relevant tax authority dated on or after October 1, 2017 for yourself and/or spouse that indicates a 2017 IRS income tax return was not filed with the IRS or other relevant tax authority.

_____ Check here if confirmation of non-filing is provided.

_____ Check here if confirmation of non-filing will be provided later.

Individuals Who Filed an Amended IRS Income Tax Return

An individual who filed an amended IRS income tax return for tax year 2017 must provide:

- A **2017 IRS Tax Return Transcript** (that will only include information from the original tax return and does not have to be signed), or any other IRS tax transcript(s) that includes all of the income and tax information required to be verified; *and*
- A signed copy of the 2017 IRS Form 1040X, "Amended U.S. Individual Income Tax Return," that was filed with the IRS.

Individuals Who Were Victims of IRS Tax-Related Identity Theft

An individual who was the victim of IRS tax-related identity theft must provide:

- A Tax Return DataBase View (TRDBV) transcript obtained from the IRS, or any other IRS tax transcript(s) that includes all of the income and tax information required to be verified; *and*
- A statement signed and dated by the tax filer indicating that he or she was a victim of IRS tax-related identity theft and that the IRS is aware of the tax-related identity theft.

Section 4: Certifications, Signatures and Contact Information

By signing this *Institutional Verification Form*, I (we) certify that all information reported to qualify for federal financial assistance is complete and correct.

Student Signature: _____

Date: _____

*Student's Mailing Address: _____

Street

City

State and Zip

*Student's Telephone Numbers: _____

Home

Cell

** To receive all correspondence from SCC, please keep your mailing address updated in the SCC records office. The majority of communications from the SCC financial aid office, including the award notification, will be sent to your SCC email account. Through My SCC Portal, you must review your email and announcements regularly to ensure you have the latest information about your financial aid. **

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

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