Your current (2015-2016) Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. You and one parent (if dependent) must complete and sign this worksheet, attach any required documents, and submit the form along with any other additional information required by the Student Financial Services Office. Go to: polk.edu; click on Admission & Aid, Financial Aid, and then Forms.

Student Name (Please Print): _______________________________________ Student ID: _______________________

Contact Phone Number: ______________________________________ Academic Year/Term: ______________________

A. Dependency Status: Please check the box that applies.

☐ Dependent- A student is considered dependent if he/she was required to provide parental data on the FAFSA.

☐ Independent- A student is considered independent if he/she was not required to provide parental data on the FAFSA.


On your 2015-2016 FAFSA, you stated that someone in your household paid child support due to a requirement in 2014. Please complete the following information. DO NOT LEAVE THIS BLANK; if not applicable, enter “N/A”. If for any reason we believe the information provided is not accurate, we may require additional documentation.

<table>
<thead>
<tr>
<th>Child Support you, spouse, or if dependent parent PAID</th>
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<tbody>
<tr>
<td>Child’s Name and age</td>
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By signing this worksheet, I certify that all information reported on this worksheet is complete and correct under penalty of perjury.

___________________________________                                       ____________________________________
Student Signature                        Date                                                 Parent Signature (if dependent)          Date

Office of Student Financial Services
999 Avenue H NE
Winter Haven, FL 33881-4299
Phone: 863.297.1004
Fax: 863.298.6850; E-mail: financialaid@polk.edu

Polk State College is committed to and encourages equal opportunity/equity/access for its programs, services, and activities.