



# Santiago Canyon College

## Financial Aid Office

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# 2020-2021 CALIFORNIA DREAM ACT INDEPENDENT STUDENT VERIFICATION WORKSHEET

Your 2020–2021 California Dream Act application was selected for a review process called verification. We are required to confirm the information you reported on your Dream Act application. To verify that you provided correct information, the financial aid administrator at your school will compare your Dream Act with the information on this worksheet and with any other required documents. If there are differences, your Dream Act 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 your school. **Your school may ask for additional information if your verification status changes.**

## A. Student Information

Student's Last Name                      First Name                      M.I.

Student's Identification (ID) Number

Student's Street Address (include apt. #)

Student's Date of Birth

City, State, Zip Code

E-mail Address

Student's Home Phone Number

Student's Alternate or Cell Phone Number

## B. Independent Student Family Information

List below the people in the student's household. Include:

- The student (**yourself**)
- The student's spouse, **if the student is married.**
- The student's or spouses children if the student or spouse will provide more than half of their support from July 1, 2020 through June 30, 2021, even if the children do not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of their support and will continue to provide more than half of their support through June 30, 2021.

For any household member who 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, 2020 and June 30, 2021 include the name of the college. 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	Enrollment Status: Half-time (6 units) or more (Yes or No)
		<i>Self</i>	<i>SCC/SAC</i>	<i>Yes</i>

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. Independent Student Income Information to Be Verified – Answer Section 1 OR Section 2

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1. **STUDENT TAX FILERS-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 2018 or had a change in marital status after December 31, 2018. If the student and spouse filed separate 2018 IRS income Tax Returns, 2018 Transcripts must be provided for **each**.

**INSTRUCTIONS:** Complete this section if the student and spouse **filed or will file a 2018 IRS Income Tax Return(s)**. Acceptable documentation includes a SIGNED copy of the 2018 1040 Tax Return **OR** a 2018 IRS Tax Return Transcript. A 2018 IRS Tax Return Transcript may be obtained through the following:

- Telephone Request – 1-800-908-9946
- Paper Request Form – IRS Form 4506T-EZ or IRS Form 4506-T

Check the box that applies:

- Check here if a SIGNED 2018 TAX RETURN OR 2018 IRS TAX RETURN TRANSCRIPT(S) **IS PROVIDED**.
- Check here if a SIGNED 2018 TAX RETURN OR 2018 IRS TAX RETURN TRANSCRIPTS(S) **WILL BE PROVIDED LATER**.
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2. **STUDENT NON-FILERS ONLY** – The instructions and certifications below apply to the student and/or spouse, if the student is married. Complete this section if the student and/or spouse **will not file and are not required to file a 2018 income tax return** with the IRS

Check the box that applies:

- The student and/or spouse **were NOT** employed and had no income earned from work in 2018. **The Non-Tax Filer Verification** form must be submitted.
- The student and/or spouse **were** employed in 2018. Complete the **Non-Tax Filer Verification** form.

## D. Certifications and Signatures

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

\_\_\_\_\_  
Student's Signature (Required)

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Print Student Name

### Non-Discrimination Policy

The Rancho Santiago Community College District is committed to equal opportunity in educational programs, employment, and all access to institutional programs and activities. The District, and each individual who represents the District, shall provide access to its services, classes, and programs without regard to national origin, religion, age, gender, gender identity, gender expression, race or ethnicity, color, medical condition, genetic information, ancestry, sexual orientation, marital status, physical or mental disability, pregnancy, or military and veteran status, or because he or she is perceived to have one or more of the foregoing characteristics, or based on association with a person or group with one or more of these actual or perceived characteristics. The Chancellor shall establish administrative procedures that ensure all members of the college community can present complaints regarding alleged violations of this policy and have their complaints heard in accordance with the Title 5 regulations and those of other agencies that administer state and federal laws regarding nondiscrimination. No District funds shall ever be used for membership, or for any participation involving financial payment or contribution on behalf of the District or any individual employed by or associated with it, to any private organization whose membership practices are discriminatory on the basis of national origin, religion, age, gender, gender identity, gender expression, race, color, medical condition, genetic information, ancestry, sexual orientation, marital status, physical or mental disability, pregnancy, or military and veteran status, or because he or she is perceived to have one or more of the foregoing characteristics, or because of his or her association with a person or group with one or more of these actual or perceived characteristics. Inquiries regarding compliance and/or grievance procedures may be directed to: **Rancho Santiago Community College District Title IX Officer and Section 504/ADA Coordinator John Didion 2323 N. Broadway Santa Ana, CA 92706 Phone: (714) 480-7489**