

READING AREA COMMUNITY COLLEGE FINANCIAL AID OFFICE

10 South Second Street, P.O. Box 1706 Reading, Pennsylvania 19603-1706

610.607.6225 / FAX: 610.607.6290 / www.racc.edu

V4-INDEPENDENT 2023-2024 Verification Worksheet

Your application for financial aid we will compare information from In accordance with federal law, RA	n your FAFSA with your 2021 ACC must receive this information	Federal tax return transcripts and from you before disbursing federa	this verification worksheet.
between your FAFSA application	and these documents, we will elec	tronically correct your FAFSA.	
Print Student's Last Name		First Name	
AACC ID or SSN Date		of Birth	Phone Number
CHILD SUPPORT PAID The student or spouse, who is a me who paid the child support, the natchild support was paid, and the to provide a separate page that include the control of the contr	mes of the persons to whom the catal annual amount of child support	hild support was paid, the names of that was paid in 2021 for each ch	of the children for whom the
Please complete the table below.		ост и и и по	
Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name and Age of Child for Whom Support was Paid	Amount of Child Support Paid in 2021
A statement from the individual	ment or divorce decree that shows the	amount of child support to be provide g the amount of child support received	ed;
Copies of the child support page.	yment checks or money order receipts.		
SNAP BENEFITS (FOOD STAM	MPS)		
Indicate yes or no if you and/or you (formerly known as food stamps)	-	022 calendar years.	unt Program or SNAP

If asked by the student's school, I/we will provide documentation of the receipt of SNAP Benefits during 2021 and/or 2022.

IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

If the student is unable to appear in person at Reading Area Community College to verify his/her/their identity, the student must provide:

- a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to, a driver's license, other state-issued ID or passport;
- b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I,(Print Student's Name)	, am the individual signing this	
(Print Student's Name) Statement of Education Purpose and that the federal student	financial assistance I may receive will only	
be used for educational purposes and to pay the cost of atter	· · · · · · · · · · · · · · · · · · ·	
Reading Area Community College for 2023-2024.	iding .	
(Name of Postsecondary Educational Institution)		
(TO BE USED ONLY IF MAILING I	FORM - NOT RECOMMENDED)	
Notary's Cer		
Commonwealth of		
County of		
	narranally appeared before me and provided to me	
I certify that personally appeared before me and provided to me		
satisfactory evidence as proof to be the above-named person who signed	the foregoing instrument.	
In witness whereof, I hereunto set my hand and official seal.		
	(Notary signature)	
	(Date)	
	(=)	
Signatures		
X		
Student	Date	
X	OFFICE USE ONLY:	
Spouse	Received by:Date:	
	READING AREA COMMUNITY COLLEGE OFFICE OF FINANCIAL AID	

Warning: If you purposely give false or misleading information, you may be fined, sentenced to jail, or both.