



**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](http://www.racc.edu)

**V5 - DEPENDENT**

**2022-2023  
 Verification  
 Worksheet**

Your application for financial aid was selected for review by the U.S. Department of Education in a process called **verification**. We will compare information from your FAFSA with both student and parent(s)' 2020 Federal tax return transcripts and this verification worksheet. In accordance with federal law, RACC must receive this information from you before disbursing federal aid. If there are differences between your FAFSA application and these documents, we will electronically correct your FAFSA.

Print Student's Last Name	First Name	M.I.
_____	_____	_____
RACC ID or SSN	Date of Birth	Phone Number
_____	_____	_____

**CHILD SUPPORT PAID**

One of the parents included in the student's household, paid child support in 2020. List below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2020 for each child.

Please complete the table below.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support was Paid	Amount of Child Support Paid in 2020

**Note:** If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation such as:

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks or money order receipts.

**SNAP BENEFITS (FOOD STAMPS)**

Indicate yes or no if someone in the student's household received benefits from the Supplemental Nutrition Assistant Program or SNAP (formerly known as food stamps) any time during the 2020 or 2021 calendars years.

- No
- Yes. My custodial parent/stepparent received SNAP Benefits in 2020 and/or 2021.

If asked by the student's school, I will provide documentation of the receipt of SNAP Benefits during 2020 and/or 2021.

**IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE**

If the student is unable to appear in person at Reading Area Community College to verify his or her 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, \_\_\_\_\_, 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 attending  
Reading Area Community College for 2022-2023.  
(Name of Postsecondary Educational Institution)

**(TO BE USED ONLY IF MAILING FORM - NOT RECOMMENDED)**  
**Notary's Certificate**

Commonwealth of \_\_\_\_\_

County of \_\_\_\_\_

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 \_\_\_\_\_  
Custodial Parent

<b>OFFICE USE ONLY:</b>	
Received by: _____	Date: _____
<b>READING AREA COMMUNITY COLLEGE OFFICE OF FINANCIAL AID</b>	

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