



**Hinds Community College
Office of Financial Aid
2023-2024
Dependent Verification**

Office Use Only:	
Name:	_____
ID:	_____
Received by:	_____
	FA23CDVF

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The verification process requires Hinds Community College to compare your FAFSA information with the information on all institutional required documents. You must complete and sign this institutional verification document, attach any required documents, and submit all required documents to us. Additional information may be required to resolve conflicting data. **Please add your Hinds ID number on all attached documents.**

A. STUDENT INFORMATION

_____	_____	_____	_____	_____
Last Name	First Name	M.I.	ID Number (REQUIRED)	Phone number

B. FAMILY INFORMATION

PLEASE READ CAREFULLY BEFORE COMPLETING:

List the people in your household. Including:

1. Yourself and your parent(s) (including stepparent) even if you don't live with your parents, and
2. Your parents' other children if your parents will provide more than half of their support from July 1, 2023, through June 30, 2024, or if the other children would be required to provide parental information if they were completing a FAFSA for 2023-2024. Include children who meet either of these standards, even if the child does not live with the parents.
3. Other people if they now live with your parents and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2023, through June 30, 2024.
4. **Proof of Enrollment (other than student) is required for any household member, 24 and older, listed as attending college.**

Write the names of ALL household members in the space(s) below. Also, write in the name of the college for any household member, **excluding your parent(s)**, 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, 2023, and June 30, 2024.

Name	Age	Relationship	College
		<i>SELF</i>	<i>HINDS CC</i>

D. STUDENT'S 2021 TAX INFORMATION**1. Tax Return Filers – Complete this section if the student filed a 2021 IRS Tax Return. (Check box that applies)**

- Student has used the IRS DRT on the FAFSA 2021 IRS Tax Return Transcript is attached 2021 IRS Tax Return Transcript will be provided later

2. Non Tax Return Filers – Complete this section if student will not file and is NOT REQUIRED to file a 2021 IRS Tax return. (Check box that applies)

- Student did not work and had no income earned from work in 2021.
- Student was employed in 2021, but was not required to file a tax return. List the names of all employers and the amount earned from each employer. ***Provide a Wage & Income Transcript from www.IRS.gov.***

Employer's Name	2021 Amount Earned

E. PARENT'S 2021 TAX INFORMATION**1. Tax Return Filers – Complete this section if the parent filed a 2021 IRS Tax Return. (Check box that applies)**

- Parent(s) has used the IRS DRT on the FAFSA 2021 IRS Tax Return Transcript is attached 2021 IRS Tax Return Transcript will be provided later

2. Non Tax Return Filers – Complete this section if Parent(s) will not file and is NOT REQUIRED to file a 2021 IRS Tax return (Check box that applies)

- Parent(s) did not work and had no income earned from work in 2021.
 _____ **Attached is confirmation of non-filing status.**
 _____ **Non-filing confirmation will be provided later.**

- Parent(s) was employed in 2021, but was not required to file a tax return. List the names of all employers and the amount earned from each employer. ***Provide a Wage & Income Transcript from www.IRS.gov.***

Employer's Name	2021 Amount Earned

F. CERTIFICATION AND SIGNATURE

Warning: Purposely giving false or misleading information may result in a fine, imprisonment, or both.

By signing this worksheet, I (we) certify that all the information reported is complete and correct.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

In compliance with Title VI of the Civil Rights Act of 1964, Title IX, Education Amendments of 1972 of the Higher Education Act, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990 and other applicable Federal and State Acts, Hinds Community College offers equal education and employment opportunities and does not discriminate on the basis of race, color, national origin, religion, sex, age, disability or veteran status in its educational programs and activities. We recognize our responsibility to provide an open and welcoming environment that fosters a culture of diversity, equity, and inclusion for employees and students to collaboratively learn, work and serve our communities. **The following have been designated to handle inquiries regarding these policies: EEOC Compliance:** Director of Diversity, Equity and Inclusion Box 1100 Raymond MS 39154; Phone: 601-857-3458 or Email: EEOC@hindsc.edu. **Title IX:** DeAndre House, Associate Vice President Student Services, Title IX Coordinator Box 1100 Raymond MS 39154; Phone: 601-857-3353 or Email: TitleIX@hindsc.edu.

Mail to: Office of Financial Aid – P.O. Box 1100 – Raymond, MS 39154-1100

Fax: 601-857-3605