Financial Aid Services, Building 14
Contact by Email: faid@tacomacc.edu
Phone: 253.566.5080 Fax: 253.460.2020

Please submit in person to the Financial Aid Office.

Contact us for office hours

Your 2022-2023 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. In this process, the Financial Aid Office will compare information from your FAFSA with the information you provide on this worksheet and with any other required documents. The law gives the College the right to ask you for this information before awarding Federal Aid. If there is a difference between your FAFSA and the information on any of your verification documents, the College will make the correction electronically. **Return the completed form to the TCC Financial Aid Office**. Your application cannot be processed without this information.

DO NOT LEAVE SECTIONS BLANK - READ AND COMPLETE ALL SECTIONS! INCOMPLETE FORMS WILL DELAY THE PROCESSING OF YOUR AID

A. Student Information	n (please print legibly)		
Last Name	First Name		
240(1141110	T il ot than io		
Date of Birth	Phone Number (include area cod	de)	ctcLink student ID number
Check One:			
☐ Dependent Student		☐ Indepe	ndent Student
A student is considered dependent if he/she was required to provide parental information on the FAFSA.		A student is considered independent if he/she was not required to provide parental information on the FAFSA.	
D. Identity/Ctetens	ant of Educational Duma		
•	ent of Educational Purpos		for office hours
Must be signed by student in pers	son at the TCC Financial Aid Office. Pl	ease contact us	Tor office flours.
signed. If you cannot appear in perother state-issued ID or Passport).	rson, contact our office. Valid unexpired	government issu e student's photo	TCC financial aid staff member at the time it is used photo ID is required for this section (driver's license, to ID that is annotated by the institution with the date it was and review the student's ID.
I certify that I		am the individual	I signing this Statement of Educational Purpose
	student's name		
and that the Federal student financ Community College for 2022-2023.	•	used for education	onal purposes and to pay the cost of attending Tacoma
Student's Signature	Dat	e	Student's ID Number
Witnessed by TCC:		_	
Witnessed by TCC:Financial Aid S	Staff Member's Signature	_	Date

		Dogo 2
Name	ctcLink Student ID number	Page 2
C. Sign the Worksheet and return to the T	CC Financial Aid Office, Building 14	
Each person signing below certifies that all information must sign and date. If you are a dependent student, the and date. Warning: if you purposely give false or misle	e parent whose information is reported on the FAFSA	must also sign
Student's Signature	Date	
Parent's Signature (if dependent)	Date	

Tacoma Community College values diversity and is an Equal Opportunity Employer and Educator. Tacoma Community College provides equal opportunity in education and employment and does not discriminate on the basis of race, color, national origin, age, disability, genetic information, sex, sexual orientation, marital status, creed, religion, or status as a veteran of war. Prohibited sex discrimination includes sexual harassment (unwelcome sexual conduct of various types). Provides reasonable accommodations for qualified students, employees, and applicants with disabilities in accordance with the Americans with Disabilities Act and Federal Rehabilitation Act. The following persons have been designated to handle inquiries regarding non-discrimination policies: Stephen Smith, Title II and Title IX, Building 14, 253-566-5055; Dr. Davi Kallman, Section 504 Officer, Building 7, 253-566-5157.