



**SOUTH CAROLINA COMMISSION ON HIGHER EDUCATION
STUDENTS WITH DISABILITIES
TUITION TAX CREDIT VERIFICATION**

CHE-400

(9/1/05)
0000

Date: _____ Tax Year in which you are filing: _____ (January 1 - December 31)

Part I. Taxpayer Information

Last Name: _____ First Name: _____ M.I.: _____

Social Security Number: ____ - ____ - _____

Mailing Address: _____

Phone Number: () _____

Part II. Student Information

Last Name: _____ First Name: _____ M.I.: _____

Social Security Number: ____ - ____ - _____

Mailing Address: _____

Phone Number: () _____

South Carolina Institution of attendance: _____

Part III. Disability Services Provider Verification

The Disability Services Provider at the institution of attendance must complete Part III. If the student attended more than one institution in the tax year, a Verification Form must be completed for each institution of attendance and must be verified by the Disability Services Provider at each institution of attendance.

Name: _____ Title: _____

Institution: _____

Office: _____

I verify that _____ was certified under the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973 as a student with a disability prior to each semester of enrollment (Spring, Summer, and Fall) semesters. I have determined that this student was unable to successfully complete 30 credit hours (or credit hour equivalents) this year. As a result, _____ was approved to enroll in less than 30 credit hours (or credit hour equivalents) during the Spring, Summer, and Fall semesters.

Signature, Disability Services Provider

Date

Part IV. Student / Taxpayer Verification

I hereby certify that the eligibility requirements for the Tuition Tax Credit are met in accordance with Section 2, Article 25, Chapter 6, Title 12 of the 1976 Code. I hereby certify that the above Disability Services Provider has determined that the credit hour requirement be reduced as a result of a documented and verified disability.

Student Signature (required)

Date

Parent / Legal Guardian (required)

Date

**This document must be attached to the South Carolina Department of Revenue
Tuition Tax Credit Form (I-319) and submitted together with the SC1040.**