

2023-2024 Verification Worksheet

STUDENT LAST NAME	E STUDE	ENT FIRST NAME	Stude	ent ID#	Soc	Sec. #	Birthdate	F	Phone Number
Submit to the Financial Aid		ays after notification.	If more spa	ice is needed	for any lin	ne item on thi	s form, provide a	-	
that includes the student's name and ID number at the top									
SECTION 1 - NUMBER O	OF HOUSEHOLD	MEMBERS AND N	IUMBER IN	N COLLEGE					
INSTRUCTIONS FOR DEPEN			<>				<u>NDEPENDENT_S</u>		
List below the people in the <u>parent's</u> household. Include: List below the people n the student's household. Include:									
 student parents (including stepparent) 	t) even if student doe	s not live with the parer	nts		-	- <u>student & student's spouse</u> if married - student's and/or spouse's children if the student or spouse will provide			
 - <u>parents</u> (including <u>stepparent</u>) even if student does not live with the parents - <u>student's and/or spouse's children</u> if the student or spouse will pro- parent's <u>other children</u> if the parents will provide more than 1/2 their support - <u>student's and/or spouse's children</u> if the student or spouse will pro- more than 1/2 of the children's support from July 1, 2023 through 					•				
from July 1, 2023 through June		•		June 30, 2024, even if the child does not live with the student					
provide parental information if Include children who meet eith		-		 - <u>other people</u> if they now live with the stud spouse provides more than 1/2 of the other 					
with parents.	The of these standard.	S even in not inving					ie to provide more than 1/2 of that person's support through		
							e child does not live	-	
 other people if the now live w 1/2 their support between lub 			an						
1/2 their support between July	y 1, 2025 and june 50),2024.							
Number in College: Also include	e in the space below	information about any l	nousehold me	ember (see abo	ove for defin	itions) who			
is, or will be, enrolled <u>at least ha</u>	<u>alf time</u> in a degree, c	liploma, or certificate p	rogram at an	eligible postse	condary inst	titution			
any time between July 1, 2023 a	and June 30, 2024. In	clude the name of the o	college	-					
Full Name			Age	Relationsh	nip	College Currently Attending (at least half-time)			
				Self		East Centra	al College		
			<u> </u>	+					
CECTION 2. TAVES (abd		Lastand if one	l'askla an		····+(a) +b	-templies)			
SECTION 2 - TAXES (che									
Filed a 2021 Federal Tax				-			or		
provided a <u>signed copy of</u>	<u>i their 2021 тах к</u>	<u>eturn</u>	Date III	inked :					
Student		Spouse (if married)		Parent 1 (if	f dependent)		Parent	t 2 (if depende	ent)
Will not file <u>and are not re</u>	required to file a 7	2021 tax return wit	h the IRS, b	ut WAS EM	PLOYED IN	√ 2021 = Par	ent(s) and		
Independent student(s) m	nust provide the 2	021 IRS "Verificatic	n of non-fil	ler letter" a	nd all 2023	1 W2's.			
<u>Dependent Student(s)</u> mu	ist list all sources	of 2021 income bel	ow.						
Student Spouse (if married) Parent 1 (if dependent) Parent 2 (if dependent)					ent)				
Will not file and are not re	required to file a					VFD in 2021		. =	
and Independent student			-						
	(5)						- · ·	_	
Student		Spouse (if married)		Parent 1 (if				t 2 (if depende	ent)
FOR NON-TAX FILERS: List			it earned in	2021 & wh	1				
STUDENT/SPOUSE 2021 INCO	OME FROM WORK	-	W2 attachd?			S) 2021 INCC	OME FROM WO		W2 attachd?
Source:		\$ \$	 		Source:			\$	
Source: Source:		\$	<u> </u>		Source: Source:			\$ \$	
Total Income from Work		\$				ome from W	lork	\$ \$	-
CERTIFICATION		Ş	L		Totarmet		UIK	Ŷ	
EACH PERSON SIGNING									
CERTIFIES THAT ALL OF THE X					x				
INFORMATION REPORTED IS									
COMPLETE & CORRECT	STUDENT SIGNA	TURE		DATE	PARE	NT SIGNATU	RE		DATE

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

Submit form to: Financial Aid Office | finaid@eastcentral.edu | fax 636-583-6651 | call 636-584-6588 | 1964 Prairie Dell Road, Union, MO 63084



Identity and Statement of Educational Purpose

You, the student must appear in person at East Central College to verify your identity by presenting an unexpired valid government-issued photo identification (ID), such as but not limited to, a driver's license, other state-issued ID, or passport. East Central College will maintain a copy of your photo ID that is annotated with the date it was received & reviewed & the name of the official at the institution authorized to collect your ID. In addition, you must sign, in the presence of the institutional official, the following Statement of Educational Purpose.

<u>ONLY</u> to be signed AT THE INSTITUTION or in the presence of a Notary Public					
AUTHORIZED COLLEGE OFFICIAL:		STUDENT:			

Copy student unexpired, valid government-issued photo ID AT THE TIME of their signing the Statement & annotate that copy with your name and the date verifying student identity. You may place it below & make a copy:

		am	the in
AUTHORIZED OFFICIAL NAME	DATE	the	e Feder
		for	educa
		Co	llege
INSTRUCTIONS TO AUTHORIZ	ED COLLEGE OFFICIAL:		
Place ID here and copy BE	ORE student signs		
		(St	tuden
		(Da	ate)

Statement of Educational Purpose

If you're unable to be present at East Central College: Notary's Certificate of Acknowledgement (below)

If you, the student, are unable to appear in person at East Central College to verify your identity, you must provide:

(a) <u>A copy of the unexpired, valid government-issued photo identification (ID)</u> that is acknowledged in the notary statement or that is presented to a notary, such as but not limited to, a driver's license, other state-issued ID, or passport; and

(b) <u>The original Statement of Educational Purpose provided above, which must be notarized.</u> If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

THIS STATEMENT & COPY OF ID MUST BE SUBMITTED TO EAST CENTRAL COLLEGE IN ORIGINAL PAPER FORM

State of	City/County of	On (date)	_before me,
(Notary's name)	, k	ersonally appeared, (signer)	, and proved to me on basis of satisfactory
evidence of identificatio	n (type of ID)	to be the above-named per	rson who signed the foregoing instrument.

WITNESS my hand and official seal

(Notary signature)

My commission expires on (Date)

(seal)

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