



2020-21

V1

## VERIFICATION WORKSHEET

|           |            |             |             |           |      |
|-----------|------------|-------------|-------------|-----------|------|
| LAST NAME | FIRST NAME | Student ID# | Soc. Sec. # | Birthdate | Ph # |
|-----------|------------|-------------|-------------|-----------|------|

Submit to the Financial Aid Office within 30 days after notification. If more space is needed for any item on this form, provide a separate page that includes the student's name and ID number at the top

**SECTION 1 - NUMBER OF HOUSEHOLD MEMBERS AND NUMBER IN COLLEGE****INSTRUCTIONS FOR DEPENDENT STUDENTS:** <---OR--->List below the people in the parent's household. Include:

- **student**
- **parents** (including **stepparent**) even if student does not live with the parents
- **parent's other children** if the parents will provide more than 1/2 their support from July 1, 2020 through June 30, 2021, or if they would be required to provide parental information if they were completing the 2020-21 FAFSA. Include children who meet either of these standards even if not living with parents
- **other people** if they now live with the parents and parents provide more than 1/2 their support between Jul 1, 2020 and June 30, 2021

**INSTRUCTIONS FOR INDEPENDENT STUDENTS:**

List below the people in the student's household. Include:

- **student & student's spouse** if married
- **student's and/or spouse's children** if the student or spouse will provide more than 1/2 of the children's support from July 1, 2020 through June 30, 2021, even if the child does not live with the student.
- **other people** if they now live with the student and the student or spouse provides more than 1/2 of the other person's support and will continue to provide more than 1/2 of that person's support through June 30, 2021

**Number in College:** Also include in the space below information about any household member (see above for definitions) who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary institution any time between July 1, 2020 and June 30, 2021. Include the name of the college

| FIRST NAME | M.I. | LAST NAME | AGE | RELATIONSHIP | COLLEGE | 1/2 TIME? |
|------------|------|-----------|-----|--------------|---------|-----------|
|            |      |           |     |              |         |           |
|            |      |           |     |              |         |           |
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|            |      |           |     |              |         |           |

**SECTION 2 - TAXES** (Check the box for student and, if applicable, spouse or parent(s) that applies)**Filed a 2018 Federal Tax Return with the IRS and 'linked'** taxes using the IRS Data Retrieval Tool orprovided a **signed copy of their 2018 Tax Return**

Date linked : \_\_\_\_\_

☐ Student
☐ Spouse (if married)
☐ Parent 1 (if dependent)
☐ Parent 2 (if dependent)

**Will not file and are not required to file** a 2018 tax return with the IRS, but **WAS EMPLOYED IN 2018** = Parent(s) and Independent student(s) must provide the 2018 IRS "Verification of non-filer letter" and all 2018 W2's.

☐ Student
☐ Spouse (if married)
☐ Parent 1 (if dependent)
☐ Parent 2 (if dependent)

**Will not file and are not required to file** a 2018 tax return with the IRS, and **WAS NOT EMPLOYED** in 2018 = Parent(s) and Independent student(s) must submit the 2018 IRS "Verification of non-filer. letter"

**FOR NON-TAX FILERS:** List the name of each employer, amount earned in 2018 & whether a W-2 form is attached.

| STUDENT/SPOUSE 2018 INCOME FROM WORK | W2 attachd?              | PARENT(S) 2018 INCOME FROM WORK | W2 attachd?              |
|--------------------------------------|--------------------------|---------------------------------|--------------------------|
| Source: \$                           | <input type="checkbox"/> | Source: \$                      | <input type="checkbox"/> |
| Source: \$                           | <input type="checkbox"/> | Source: \$                      | <input type="checkbox"/> |
| Source: \$                           | <input type="checkbox"/> | Source: \$                      | <input type="checkbox"/> |
| Total Income from Work \$            |                          | Total Income from Work \$       |                          |

**CERTIFICATION**

EACH PERSON SIGNED  
CERTIFIES THAT ALL OF THE  
INFORMATION REPORTED IS  
COMPLETE & CORRECT

X \_\_\_\_\_

X \_\_\_\_\_

STUDENT SIGNATURE

DATE

PARENT SIGNATURE

DATE

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