

2021-2022 Verification Worksheet

| STUDENT LAST NAM | ME | E STUDENT FIRST NAME | | Student ID# | | Soc. Sec. # | | Birthdate | Phone Number | | |
|--|--|----------------------|---|--|---------------|---------------------------------|--|-------------------------|----------------|--------------|--|
| Submit to the Financial Aid Office within 30 days after notification. If more space is needed for any line 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></or> | | | | | | | INSTRUCTIONS FOR INDEPENDENT STUDENTS: | | | | |
| List below the people in the <u>p</u> | List below the people in the student's household. Include: | | | | | | | | | | |
| - <u>student</u> | - <u>student & student's spouse</u> if married | | | | | | | | | | |
| - parents (including steppare | - student's and/or spouse's children if the student or spouse will provide | | | | | | | | | | |
| the parents - parent's other children if th | more than 1/2 of the children's support from July 1, 2021 through June 30, 2022, even if the dhild does not live with the student | | | | | | | | | | |
| their support from July 1, 20 | - <u>other people</u> if they now live with the student and the student or | | | | | | | | | | |
| or if they would be required | spouse provides more than 1/2 of the other person's suport and will | | | | | | | | | | |
| if they were completing the | continue to provide more than 1/2 of that person's support through | | | | | | | | | | |
| meet either of these standa | • | | June 30, 2022, even if the dhild does not live with the student | | | | | | | | |
| - <u>other people</u> if the now live with the parents and parents | | | | | | | | | | | |
| provide more than 1/2 their June 30,2022 | support b | etween July | 1, 2021 and | | | | | | | | |
| Number in College: Also inclu | ude in the : | space below | information about any ho | usehold membe | er (see above | for definition | ons), is or will be enr | olled | | | |
| at least half-time in a degree, | , diploma, | or certificate | program at an eligible po | stsecondary ins | titution andy | time betwe | en July 1, 2021 and | July 30, 2022 | | | |
| Include the name of the colle | ege. | | | | | | | | | | |
| | Age | e Relations | | College Currently Attending (at least half-time) | | | | | | | |
| | | | | Self | | | East Central College | | | | |
| | | | | | | | | 2007 001111 | | | |
| | | | | | | | | | | | |
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| | _ | | | | | | | | | | |
| SECTION 2 - TAXES (check the box for student and, if applicable, spouse or parent(s) that applies) | | | | | | | | | | | |
| Filed a 2019 Federal Tax Return with the IRS and 'linked' taxes using the IRS Data Retrieval Tool or provide a signed copy of their | | | | | | | | | | | |
| 2019 Tax Return | | Date li | nked : | | | | | | | | |
| | | | | | | | | | | | |
| Student | | Sp | OUSE (if married) | | P: | arent 1 (if | dependent) | | Parent 2 (if o | Jependent) | |
| Will not file and are no | t require | ed to file a | a 2019 tax return with | n the IRS, but | WAS EMP | LOYED IN | 1 2019 = Parent(s | s) and Independ | lent student | :(s) | |
| must provide the 2019 | IRS "Veri | ification of | f non-filer letter" and | all 2019 W2 | 's. | | | | | | |
| Dependent Student(s) | must list | all sources | s of 2019 income belo | ow. | | | | | | | |
| Ctudent | | c., | | | | aront 1 //r | | | Doront 2 // | | |
| Student | | | OUSE (if married) | | | arent 1 (if | | | Parent 2 (if o | Jependent) | |
| Will not file <u>and are no</u> student(s) must submit | | | | | WAS NOT | EMPLOY | ED in 2019 =Par | ent(s) an indep | endent | | |
| | 110 201 | | | | | | | | | | |
| Student Spouse (if married) | | | | Parent 1 (if dependent) | | dependent) | | Parent 2 (if dependent) | | | |
| FOR NON-TAX FILERS: | iame of ea | ich employer, amoun | ther a W | -2 form is attach | ed. | | | | | | |
| STUDENT/SPOUSE 2019 INCOME FROM WORK | | | | W2 attached? | | PARENT(S) 2019 INCOME FROM WORK | | | | W2 attached? | |
| Source: \$ | | | | Source | | Source: | | | \$ | | |
| Source: | | | \$ | | | Source: | | \$ | | | |
| Source: | | | \$ | | | Source: | | | \$ | | |
| Total Income from Wor | [.] k | | \$ | | | Total Inc | ome from Work | | \$ | | |
| CERTIFICATION | | | | | | | | | | | |
| EACH PERSON SIGNING | | | | | | | | | | | |
| CERTIFIES THAT ALL OF THE | х | | | | | х | | | | | |
| FORMATION REPORTED IS | | | | | | | | | | | |
| COMPLETE & CORRECT | STUDENT SIGNATURE | | | | DATE | PARE | PARENT SIGNATURE DATE | | | 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