

School: \_\_\_\_\_

Student Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. Should additional space be required for any of the below fields, a separate sheet may be attached to complete the data. In addition, the student and parent will need to sign and date each additional sheet. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

**A. DEPENDENT STUDENT'S FAMILY INFORMATION**

List below the people in the parents' household. Include: The parent(s)/stepparent; the student for whom verification is being completed; and other children whom the parent(s)/stepparent will provide more than half of the support for from July 1, 2023 through June 30, 2024 and/or whom the parent(s)/stepparent would be required to provide parental information for if they were completing a FAFSA for 2023-2024. Include children who meet either of these standards even if they do not live with the parents. Also include other people if they now live with the parent(s) and the parent(s) provide more than half of the other person's support and will continue to provide more than half of that person's support through June 30, 2024. Include the name of the college for any household member who will be enrolled at least half-time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2023 and June 30, 2024.

Full Name	Age	Relationship	College	At Least 1/2 Time
		self		Yes

**B. STUDENT'S INCOME INFORMATION TO BE VERIFIED - Check boxes that apply**

**1.) TAX FILERS**

- The student has used the IRS Data Retrieval Tool within the FAFSA On The Web to transfer 2021 IRS income tax return information as of this date: \_\_\_\_\_
- The student is unable or chooses not to use the IRS Data Retrieval Tool in FAFSA On The Web, and instead will provide the school a 2021 IRS Tax Return Transcript(s) or a signed and dated 2021 IRS Tax Return and applicable schedules.

**2.) NON-TAX FILERS - ONLY complete this section if the student will not file and is not required to file a 2021 income tax return with the IRS.**

- The student was not employed in 2021, and therefore, didn't have any income earned from work.
- The student was employed in 2021 and has listed below the names of all 2021 employers and the amount earned from each. Provide copies of all 2021 IRS W-2 forms issued to the student by his/her employers. List every employer even if the employer did not issue an IRS W-2 form.

Employer's Name - ONLY COMPLETE IF NOT FILING 2021 INCOME TAX RETURN	2021 Amount Earned
	\$
	\$

**C. PARENT'S INCOME INFORMATION TO BE VERIFIED - Check boxes that apply**

**1.) TAX FILERS**

- Parent 1,  Parent 2,  both:
  - the parent(s) have used the IRS Data Retrieval Tool in FAFSA On The Web to transfer 2021 IRS income tax return information as of this date: \_\_\_\_\_
- Parent 1,  Parent 2,  both:
  - the parent(s) is/are unable or choose(s) not to use the IRS Data Retrieval Tool in FAFSA On The Web, and instead will provide the school a 2021 IRS Tax Return Transcript(s) or a signed and dated 2021 IRS Tax Return(s) and applicable schedules.

**2.) NON-TAX FILERS - ONLY complete this section if the parent will not file and is not required to file a 2020 income tax return with the IRS.**

- Parent 1,  Parent 2,  Both:
  - neither parent was employed in 2021, and therefore, didn't have any income earned from work. Confirmation of non-filing from the IRS or other relevant taxing authority dated on or after October 1, 2022, will need to be included. If the parent(s) is/are not able to obtain, please complete the Verification of Non-Filing Form available from your Financial Aid Counselor.
- Parent 1,  Parent 2,  both:
  - one or both parents were employed in 2021 and have listed below the names of all 2021 employers and the amount earned from each. Provide copies of all 2021 IRS W-2 forms issued to the parents by their employers. List every employer even if the employer did not issue an IRS W-2 form. Please attach confirmation of non-filing from the IRS or other relevant taxing authority dated on or after October 1, 2022. If the parent(s) is not able to obtain, please complete the Verification of Non-Filing Form available from your Financial Aid Counselor.

Employer's Name - ONLY COMPLETE IF NOT FILING 2021 INCOME TAX RETURN	2021 Amount Earned
	\$
	\$

School: \_\_\_\_\_ Page 3 of 4

Student Name: \_\_\_\_\_ SSN: \_\_\_\_\_

2. IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE – Student must sign the below statement (this does not replace the required signature(s) at the bottom of this form) in person and their unexpired government-issued photo ID kept on file. If they cannot be present at the school they must sign the statement in front of a Notary with the Notary’s information also completed. The School representative must sign confirming they have copied the unexpired government-issued ID and will ensure it is maintained at the institution for the required Title IV record retention period.

Check the box that applies:  In Person at the School  Person in Front of a Notary

IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE (To be signed at the institution)

The student must appear in person at \_\_\_\_\_ to verify his or her identity by presenting \_\_\_\_\_ (Name of Post Secondary Educational Institution) an unexpired government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport. The institution will maintain a copy of the student’s photo ID that is annotated by the institution with the date it was received and reviewed and the name of the official at the institution authorized to receive and review the student’s ID.

Statement of Educational Purpose

I certify that I \_\_\_\_\_ am the individual signing this Statement of Educational Purpose (Print Student’s Name)

and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending

\_\_\_\_\_ for 2023-2024. (Name of Post Secondary Educational Institution)

\_\_\_\_\_  
(Student’s Signature)

\_\_\_\_\_  
(Date)

School Official Certification

I have received and reviewed \_\_\_\_\_ government-issued ID \_\_\_\_\_ (Student Name) (Type of ID)

on \_\_\_\_\_ (Date reviewed)

\_\_\_\_\_  
(School official signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Date)

School: \_\_\_\_\_

Student Name: \_\_\_\_\_ SSN: \_\_\_\_\_

**Notary's Certificate of Acknowledgement**

**IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE (To be signed in the presence of a Notary)**

The student is unable to appear in person at \_\_\_\_\_ to verify his or her identity,  
(Name of Post Secondary Educational Institution)

the student must provide to the institution;

(a) A copy of the unexpired government-issued photo identification (ID) that is acknowledged in the notary statement below 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) The original Statement of Educational Purpose, provided below, which must be notarized. 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.

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this Statement of Educational Purpose and  
(Print Student's Name)

that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending \_\_\_\_\_ for 2023-2024.  
(Name of Post Secondary Educational Institution)

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

**Notary's Certificate of Acknowledgement**

State of \_\_\_\_\_, City/County of \_\_\_\_\_ On \_\_\_\_\_,  
(Date)

before me, \_\_\_\_\_, personally appeared, \_\_\_\_\_  
(Notary's Name) (Printed Name of Signer)

and proved to me on basis of satisfactory evidence of identification \_\_\_\_\_ to be the above-named  
(Type of Government-Issued Photo ID Provided)

person who signed the foregoing instrument.



**WITNESS my hand and official seal**

\_\_\_\_\_  
(Notary's Signature)

My Commission Expires On: \_\_\_\_\_  
(Date)

**C. CERTIFICATION AND SIGNATURE**

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
Parent Signature Date

**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**