

1126 Solomon Blatt Blvd

V1/V5

2023-2024 Dependent Verification Worksheet

WHY YOU HAVE RECEIVED THIS FORM

Your application was selected for review in a process called "verification". In this verification process, we will be comparing information from your FAFSA with copies of you and your parents' 2021 federal tax return transcripts, or with W-2 forms or other financial documents. Federal regulations require us to collect this information before disbursing federal aid. If there are differences between your FAFSA and the verification documents, we will make the corrections and send the required changes electronically to the federal student aid processor to have your information reprocessed.

Student Information

Last Four of Social Security #	Student ID:	Date of Birth: / /	
Last Name:	First Name:	MI:	
Address:(include apt. no.)	City	State Zip Code	
Home Phone: () Cell P	hone: ()	Email:	

Family Information

Parent(s)/Stepparent(s) **current** Marital status: D Married/Remarried Never Married Divorced Separated Widowed Unmarried and Both Parents Living Together

Please list the Month and year PARENTS were married/remarried, separated, divorced, or widowed ____/___

List the people in your **<u>Parent's household</u>** including:

- Yourself, even if you don't live with your parents, your parents(s), including step-parents, and your parents' dependent children only if they now live with your parents AND your parents provide more than half of their support AND will continue to provide more than half of their support from July 1, 2023 through June 30, 2024.
- Other people only if they now live with your parents AND your parents provide more than half of their support AND will continue to provide more than half of their support from July 1, 2023 through June 30, 2024.
- If any household member besides you and your parents *will be attending college at least half-time* (*at least 6 credit hours*) *between* July 1, 2023, and June 30, 2024, and will be enrolled in a degree, diploma or certificate program, <u>list the name of the college they are attending below under "Name of College."</u>

Full Name	Age	Relationship	Name of College (Exclude Parents)
		Self	Denmark Tech

IF MORE THAN 6 FAMILY MEMBERS, CHECK HERE ____AND CONTINUE ON A SEPARATE SHEET OF PAPER

Return this form and any attachments to the above address.

(over)

Parent's Income Information to Be Verified

<u>TAX RETURN FILERS</u>—complete this section if the parent and/or step-parent filed or will file a 2021 income tax return with the IRS. Instructions are listed on our Financial Aid webpage on how to use the Data Retrieval Tool and/or how to request a Tax Return Transcript from the IRS.

Parent 1: Check only one box below:

□ I filed 2021 taxes and have used the IRS Data Retrieval Tool in the FAFSA on the Web to retrieve and transfer 2021 IRS income information into the student's FAFSA.

□ I filed 2021 taxes and am *unable or choose not to use the IRS Data Retrieval Tool in FAFSA on the Web*, and instead have **attached the 2021 IRS tax return transcript or 2021 Federal Income Tax Return including tax schedules** to this worksheet.

Parent 2: Check only one box below:

□ I filed 2021 taxes and have used the IRS Data Retrieval Tool in the FAFSA on the Web to retrieve and transfer 2021 IRS income information into the student's FAFSA

□ I filed 2021 taxes and *am unable or choose not to use the IRS Data Retrieval Tool in FAFSA on the Web*, and instead have **attached the 2021 IRS tax return transcript or 2021 Federal Income Tax Return including tax schedules** to this worksheet.

TAX RETURN NONFILERS—complete this section if either parent 1 or parent 2 WILL NOT FILE and is not required to file a 2021 income tax return with the IRS. Instructions are listed on our Financial Aid webpage for requesting a Non-filing Tax Return Letter from the IRS.

Parent: Check the box that applies:

Parent 1 and/or Parent 2 was NOT employed and had no income earned from work in 2021 and have attached the 2021 IRS Non-filer Tax Return Transcripts to this worksheet.

Parent 1 and/or Parent 2 was employed in 2021 and has listed below the names of all the parent's employers, the amount earned from each employer in 2021, and whether an IRS W-2 form is attached. Attach copies of all 2021 IRS W-2 forms or an equivalent document issued to the parent by employers. List every employer even if they did not issue an IRS W-2 form. If more space is needed, attach a separate page with the student's name and Social Security Number at the top.

Paren	t 1: W-2 Forms Requir	ed	_	Paren	t 2: W-2 Forms Required	1
Employer's Name	2021 Amount Earned	IRS W-2 or Equivalent Document Attached?		Employer's Name	2021 Amount Earned	IRS W-2 or Equivalent Document Attached?
Suzy's Auto Body Shop (Example)	\$2,000(example)	Yes (example)		Suzy's Auto Body Shop (Example)	\$2,000(example)	Yes (example)

**IF MORE THAN 2 Employers, CHECK HERE ____ AND CONTINUE ON A SEPARATE SHEET OF PAPER*

Dependent Student's Income Information to Be Verified

TAX RETURN FILERS — complete this section if the student, filed or will file a 2021 income tax return with the IRS.

Student: Check the box that applies.

□ I filed 2021 taxes and have used the IRS Data Retrieval Tool in the FAFSA on the Web to retrieve and transfer my 2021 IRS income information into my FAFSA.

□ I filed 2021 taxes and attached the 2021 IRS tax return transcripts or the 2021 Federal Income Tax Return including tax schedules to this worksheet.

NONFILERS ONLY — complete this section only if the student WILL NOT FILE and is not required to file a 2021 income tax return with the IRS.

Student: Check the box that applies.

The student was **NOT** employed and had no income earned from work in 2021.

□ The student was employed in 2021 and has listed below the names of all the student's employers, the amount earned from each employer in 2021, and have attached IRS W-2 forms or an equivalent document issued to the student by employers. *List every employer even if they did not issue an IRS W-2 form. If more space is needed, attach a separate page with the student's name and Social Security Number at the top.*

Employer's Name	2021 Amount Earned	IRS W-2 or Equivalent Document Attached?
Suzy's Auto Body Shop (Example	\$2,000(example)	Yes (example)

IF MORE THAN 2 Employers, CHECK HERE ____ AND CONTINUE ON A SEPARATE SHEET OF PAPER

Sign This Worksheet

By signing this worksheet, I (we) certify that all of the information to qualify for federal financial aid is complete and correct. I understand that giving false or misleading information on this worksheet can result in a fine, jail sentence, or both.