

INDEPENDENT STUDENT'S INFORMATION

V5-INDEPENDENTVerification Worksheet



PERSONALLY IDENTIFIABLE INFORMATION

Your 2024-2025 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 and your parents reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact STUDENT FINANCIAL SERVICES as soon as possible so that your financial aid will not be delayed.

Student's Last Name	Student's First Name	Student's M.I.	Stud	lent's Id
Student's Address			Stud	lent's D
City	State	Zip Code	Stud	lent's E
Student's Home Phone Number				

Student's Identification (ID) Number
Student's Date of Birth
Student's Email Address
Student's Alternate or Cell Phone Number

(2)

INDEPENDENT STUDENT'S FAMILY INFORMATION

List below the people in your household. Include:

- A.- Yourself.
- B.- Your spouse, if you are married.
- C.- Yours or your spouse's children if you or your spouse will provide more than half of their support from July 1, 2024 through June 30, 2025, even if they do not live with you.
- D.- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2025.

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 a postsecondary educational institution any time between July 1, 2024, and June 30, 2025. If more space is needed, attach a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship	Will be Enrolled at Least Half Time in College?	College
Marty Jones (example)	18	Wife	Yes	Central University
		Self		

Note: We may require additional documentation to verify the information regarding the household members enrolled in eligible post secondary educational institutions.

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(3	INCOME INFORMATION TO BE VERIFIED

A.- TAX RETURN FILERS

Complete this section if you and/or your spouse filed or will file a 2022 income tax return. The best way to verify income is by allowing the FAFSA to retrieve FEDERAL TAX INFORMATION [FTI] from the Internal Revenue Service [IRS]. Each CONTRIBUTOR [Student and Spouse] must give consent for this information to be retrieved by FAFSA. In most cases, no further documentation is needed to verify 2022 IRS income tax return information that was transferred into your FAFSA if that information was not changed.

,	STUDENT			, ,	SPOUSE		
I, the student, have have transfered 2022 Tax Information to the FAFSA on the Web.					se, have have transfered 2022 Tax n to the FAFSA on the Web.		
2022 Tax a copy of	I, the student, am unable or choose not to transfer 2022 Tax Information, and will submit to the school a copy of the my 2022 IRS Tax Return Transcript(s) or signed income tax return.			I, the spouse, am unable or choose not to transfer 2022 Tax Information, and will submit to the school a copy of the my 2022 IRS Tax Return Transcript(s) or signed income tax return.			
B NONTAX FILERS							
	Either I, o have liste earned from is properties is the company of	r if married, my spoud d below the names of om each employer in ovided. [Provide cop the student by their e employer did not is	se was employed f all employers, t 2022, and whet lies of all 2022 I employer.] List ssue an IRS W-2	d in 2022 and the amount her an IRS W RS W-2 form every employ 2 form.	-2 ns		
Student's Employer's Name	Amount earned in 2022	W-2 Provided?	Spouse's Employe	s er's Name	Amount earned in 2022	W-2 Provided?	
Each person signin	MND SIGNATURES g this worksheet certinouse, if applicable, mu		formation repor	ted on it is co	omplete and correct.		
Student's Signature		Date	Date				
Spouse Signatur	e (if applicable)		Date				

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to Student Financial Services at SOUTHWESTERN ADVENTIST UNIVERSITY.

You should make a copy of this worksheet for your records.

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