



## 2026-2027 Verification Worksheet

### WHAT IS VERIFICATION?

Your application was selected by the U.S. Department of Education for review in a process called “verification.” The office of Financial Aid must compare information from your FAFSA application with information you provide on this worksheet and other documents that you must submit to us. If there are differences between the FAFSA information and documents submitted by you, your application may need to be reprocessed. We cannot make any federal financial aid payments available to you or process a student loan request until all verification requirements have been met and the necessary corrections have been processed.

**Student Name:**

**CWID:**

**Phone Number:**

**Address:**

### SECTION 2: FAMILY SIZE

- ☐ **Dependent Students:** List the people that your parent(s) will support between July 1, 2026 and June 30, 2027. Include yourself, your parent(s), and your parents’ other children if (a) your parents will provide more than half of their support or (b) the children would be required to provide parental information when applying for Federal Student Aid. Include other people only if they now live with your parent, receive and will continue to receive, more than half of their support from them between July 1, 2026 and June 30, 2027.
- ☐ **Independent Students:** List the people that you (and your spouse) will support between July 1, 2026 and June 30, 2027. Include yourself, spouse, and your dependent children. Include other people only if they live with you, receive and will continue to receive more than half of their support from you between July 1, 2026 and June 30, 2027.

Write the names of all household family members including yourself. Additionally, please provide their relation to the student and age. If more space is needed, provide a separate page with the student’s name and CWID up top.

Full Name	Age	Relationship to Student
		Self



### 2026-2027 Verification Worksheet Continued

#### SECTION 3: VERIFICATION OF 2024 INCOME INFORMATION FOR STUDENT AND/OR SPOUSE

- ☐ The student and/or spouse (if married) used the IRS FA-DDX to transfer the 2024 IRS income tax return information on the student's FAFSA.
- ☐ The student and/or spouse (if married) were unable to use the IRS FA-DDX to transfer the 2024 IRS income tax return information into the student's FAFSA. I/we have attached a copy of my/our **2024 Federal IRS Tax Return(s) Transcripts.**
- ☐ The student and/or spouse (if married) **were not** employed and had **no income earned from work** in 2024.  
**[If the student is independent, attach the 2024 IRS verification of Non-filing Letter.]**
- ☐ The student and/or spouse (if married) were **employed** in 2024 and not required to file and have listed below the names of all employers, the amount earned from each employer in 2024, and if an IRS W-2 form or an equivalent document is provided.  
**[Attach all 2024 IRS W-2 forms issued to the student by their employers and the IRS Verification of Non-Filing Letter.]**

Employer's Name	IRS W-2 or Equivalent Provided	Annual Amount Earned in 2024
Total Amount of Income Earned from Work		\$

#### SECTION 4: VERIFICATION OF 2024 INCOME INFORMATION FOR PARENT OF DEPENDENT STUDENTS

- ☐ The parent(s) used the IRS FA-DDX to transfer 2024 IRS income tax return information into the student's FAFSA.
- ☐ The parent(s) were unable to use the IRS FA-DDX to transfer the 2024 IRS income tax return information on the student's FAFSA. I/we have attached a copy of my/our **Federal IRS Tax Return Transcript.**
- ☐ The parent(s) **were not** employed and had **no income earned from work** in 2024. **[Attach the IRS verification of Non-filing letter.]**
- ☐ The parent(s) **were employed** in 2024 and not required to file and have listed below the names of all employers, the amount earned from each employer in 2024, and if an IRS W-2 form or an equivalent document is provided. **[Attach all 2024 IRS W-2 forms issued to the parent(s) by their employers and the IRS Verification of Non-Filing Letter.]**

Employer's Name	IRS W-2 or Equivalent Provided	Annual Amount Earned in 2024
Total Amount of Income Earned from Work		\$

#### SECTION 3: CERTIFICATION

Each person signing below certifies that all of the information reported is complete and correct. The student and parent must **physically** sign and date the form. *Parent(s) signature is required for **dependent** students only.*

Student Signature:

Date:

Parent's Signature

Date: