

## 2022-23 Independent Student Verification Worksheet

Your 2022-23 Free Application for Federal Student Aid (FAFSA) was selected for federal verification. By federal law, we are required to verify certain information you have reported on the FAFSA and collect required documents. Corrections to your FAFSA may be made once verification items are submitted and reviewed.

Return this form to the Office of Financial Aid within three weeks of receiving this notice. Financial aid will not be calculated and/or disbursed to your account until verification is completed.

### PART A – STUDENT INFORMATION

1. Name: \_\_\_\_\_
2. Permanent mailing address: \_\_\_\_\_
3. Home phone number: \_\_\_\_\_ Cell number: \_\_\_\_\_
4. I am a (check only one):  Continuing Augustana student (previously enrolled)  First-time Augustana student
5. Augustana ID number (if known): \_\_\_\_\_

### PART B – VERIFICATION OF HOUSEHOLD SIZE/NUMBER IN COLLEGE List below the people in your household.

Please read the directions below. Each field in the chart must be completed. Include:

- Yourself (and your spouse, if you are married)
- Your children, if you will provide more than half of their support between July 1, 2022, and June 30, 2023, even if they do not live with you
- 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 from July 1, 2022 through June 30, 2023.

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 between July 1, 2022 and June 30, 2023.

Based on the criteria above, list names of household members, including yourself.		Age	Relationship to you	Will attend college at least half-time in 2022-23 in a degree or certificate program		Name of college this person will attend in 2022-23
First Name	Last Name			Yes	No	
1			self /applicant	<input type="checkbox"/>	<input type="checkbox"/>	Augustana College
2				<input type="checkbox"/>	<input type="checkbox"/>	
3				<input type="checkbox"/>	<input type="checkbox"/>	
4				<input type="checkbox"/>	<input type="checkbox"/>	
5				<input type="checkbox"/>	<input type="checkbox"/>	
6				<input type="checkbox"/>	<input type="checkbox"/>	
7				<input type="checkbox"/>	<input type="checkbox"/>	
8				<input type="checkbox"/>	<input type="checkbox"/>	

If you and/or your spouse filed an amended return, filed for a tax extension, or have been a victim of taxpayer identity theft, please call the Office of Financial Aid at 309-794-7207.

**PART C – STUDENT APPLICANT** All students (and spouses, if married) must complete Part C. Check only the box that applies.

- I/we filed/will file a 2020 tax return.

**How to verify your 2020 tax information:**

I used/will use the IRS Data Retrieval Tool in the FAFSA, **OR** I have submitted/will submit a signed copy of my 2020 federal tax return to the Office of Financial Aid. (Include Schedules 1, 2 and 3 if applicable.)

- I/we did not/will not file and am not required to file a 2020 tax return AND had no income.\*
- I/we did not/will not file and am not required to file a 2020 tax return AND had income.\* List below all sources and amounts of income received in 2020. You must submit all 2020 W-2 forms if you did not/will not file a 2020 tax return.

**2020 Student/Spouse Income (non-tax filers only)**

Source/Amount \_\_\_\_\_ \$ \_\_\_\_\_

Source/Amount \_\_\_\_\_ \$ \_\_\_\_\_

Source/Amount \_\_\_\_\_ \$ \_\_\_\_\_

**W-2 received for this income source?**

No  Yes  (please attach copy)

No  Yes  (please attach copy)

No  Yes  (please attach copy)

\* **NOTE:** Non-tax filers must obtain a "verification of non-filing" letter from the IRS. Visit [irs.gov](https://www.irs.gov) to get your tax record. Contact the Office of Financial Aid if you need help or if you do not get a response from the IRS after requesting a non-filing letter.

**PART D – CERTIFICATION AND SIGNATURE(S)**

By signing below, I/we certify that all information reported is true and correct to the best of my/our knowledge. If asked, I/we agree to provide proof that the information is correct. I/We allow the financial information provided to be discussed with all parties who provided data to complete the application. I/We realize that until all requested information has been submitted, reviewed and verified, no estimated financial aid will be credited to the student account. I/We authorize Augustana College to release updated or corrected information, based on verification, to the Federal Aid Processing Center.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Printed Student Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Date

WARNING: False or misleading information can lead to a fine and/or jail.