

2022-2023 Verification Worksheet for Independent Student (LVRWSI-#12)

Your 2022–2023 Free Application for Federal Student Aid (FAFSA)/California Dream Act Application was selected for review in a process called verification. The law says that before awarding Federal/State Student Aid, we may ask you to confirm the information you reported on your FAFSA/California Dream Act Application. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA/California Dream Act Application with the information on this worksheet and with any other required documents. If there are differences, your FAFSA/California Dream Act Application information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

A. Independent S	Student's Information			
Last Name	First Name	M.I.	Student's ID (10 digit)	
Street Address (inclu	de apt. no.)	Date of Birth		
City	State	Zip Code	Email Address	
Home Phone Numbe	r (include area code)	Alternate or Cell Phone Number		

B. Independent Student's Family Information

List below the people in your household. Include:

- Yourself AND Your Spouse, if you are married.
 - o In the case of California Dream Act applicant, please include registered domestic partner information.
- Your children, if any, if you will provide more than half of their support from July 1, 2022, through June 30, 2023, or if the child would be required to provide your information if they were completing a FAFSA for 2022-2023. Include children who meet either of these standards, even if they do not live with you.
 - o If you listed any children and both biological parents live together both must be included.
- 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, 2023.

Include the name of the college for any household member who will be enrolled <u>at least half time</u>, in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2022, and June 30, 2023.

Full Name	Age	Relationship	Will this person be attending College during 2022-23? (circle answer)	If YES, Name of College:	Enrolled in 6 units or more? (circle answer)
		Self	YES/NO		YES/NO
			YES/NO		YES/NO
			YES/NO		YES/NO
			YES/NO		YES/NO
			YES/NO		YES/NO
			YES/NO		YES/NO
			YES/NO		YES/NO
			YES/NO		YES/NO
			YES/NO		YES/NO

	Student/Spouse Income Informa IMPORTANT: In the case of California Dream addition, if you have a child and biological p	m Act applicant, please ir	nclude registere	d domestic par	tner tax information f	or your partner. Ir	
1	I (The Student and/or Spouse if mused the IRS DATA RETRIEVAL into either the initial FAFSA or will I, (The Student and/or spouse if mused and I WILL SUBMIT A 2020 To obtain an IRS Tax return Transcripts gas 1-800-908-9946. Make sure you order the	TOOL in the FAFSA on hen making a correction married), am unable or IRS TAX RETURN TRANS to www.IRS.gov/transcript	the Web to re on to the FAFS choose not to NSCRIPT and click on the	etrieve and trans. A. (IF CHECKE O use the IRS E "Get Transcripts (ansfer 2020 IRS inco D Skip to section D) Data Retrieval Tool i	ome information n FAFSA on the BY MAIL" link, or cal	
	section D-PAGE 2.) thttudent, and my spouse FILED SEP CHECKED Skip to section D)	ARATELY AND WILL SU	ІВМІТ ВОТН (OF OUR 2020 I	RS TAX RETURN TR	ANSCRIPTS. (IF	
C	Othexplain:).		
3	I	use if married) was not employers, the amoun copies of your, and yo e chart below then co- ing Letter, go online to return, you must reque	required to fi t earned from ur spouse's if ntinue to sect o https://www est the Verifica	le a 2020 IRS and a 2	Fax Return, but was er in 2020. Attach a DW-2 forms issued I duals/get-transcrip iling Letter using IRS	employed in 202 a Verification of by your tor call 1-800- S Form 4506-T.	
	Fm	nployer's Name			2020 TOTAL Amount		
	4. Other: (explain:).	
	Student's Other Information to I Support Paid on the FAFSA Either I, or if married my spouse v		•		•		
	Name of person Who Paid Child Support	Name of Person to \ Support was	vas Paid Name of		Child for Whom ort was Paid	Amount of Child Support Paid in 2020	
_	Contification and Ciny stress						
E.	Certification and Signature I certify that all of the information representation worksheet is complete and correct. The sign this worksheet. If married, the species optional.	e student must	information		y give false or mislea leet, you may be fine		
	Student's Signature		Dat	:e			
	Snouse's Signature		—— Dat				