

Dependent Verification Worksheet 2021-2022

Your FAFSA has been selected for a review process called "Verification." In this process, NAU will be comparing information from your application with copies of you and your parent(s)' 2019 IRS Tax Return Transcripts, or with W-2 forms and/or other financial documents. The law says we have the right to ask you for this information before awarding Federal aid. If there are differences between your application information and your financial documents, you or NAU may need to make corrections electronically.

Please **TYPE** your responses on this form and sign in **INK**.

A. STUDENT INFORMATION

Last Name	First Name	M.I.	Social Security #
Address (includes apt. no.)			Date of Birth
City	State	Zip Code	Phone Number (include area code)

B. FAMILY/HOUSEHOLD INFORMATION

1. Parent(s):

- If your parents are not married, or are not living together, list the parent who provides most of your care.
- If your parents are divorced, list your primary parent.
- If your primary parent is remarried, list your primary parent and your stepparent.

Full Name	Age	Relationship to Student (Select One)
		Parent 1: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Stepparent
		Parent 2: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Stepparent

List the people your parent(s)/stepparent will provide more than half of their support between **July 1, 2021 and June 30, 2022**.

2. Sibling(s):

- All dependent children your parents provide more than half of their support, even if they are not living in the household. If your parents do not provide more than half of their support, do NOT include them.
- Also, write in the name of the college for any siblings who will be attending college at least half-time between **July 1, 2021 and June 30, 2022** and will be enrolled in a degree or certificate program.

3. Other Member(s):

- Include other people as part of your family only if:
- They lived with your parent(s) and received more than half of their support from your parent(s) at the time you completed the FAFSA
 - They will continue to get more than half of their support from your parents between **July 1, 2021 through June 30, 2022**.

Full Name	Age	Relationship	College	Enrolled At Least ½ Time?
		SELF	NAU	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

If you need more space, attach a separate page.

C. STUDENT TAX INFORMATION

1. Check only one box below and submit required documentation:

- I am attaching a 2019 IRS Tax Return Transcript or 2019 Federal Tax Return with all applicable schedules (**signed**)
- I used the IRS Data Retrieval Tool to transfer my 2019 tax information on to my FAFSA.
- I was not employed. I will not file and am not required to file a 2019 U.S. Income Tax Return.
- I was employed during 2019 but will not file a 2019 U.S. Income Tax Return.
 - Must submit W-2 forms for each employer
 - List below the names of all employers and the amount earned from each employer

Sources/Employer Name	2019 Income Amount
	\$
	\$
	\$

D. PARENT(S)/STEPPARENT TAX INFORMATION

1. Check only one box below and submit required documentation

- I am attaching a 2019 IRS Tax Return Transcript or 2019 Federal Tax Return with all applicable schedules (**signed**)
- I used the IRS Data Retrieval Tool to transfer my 2019 tax information on to my child's FAFSA.
- I was not employed. I will not file and am not required to file a 2019 U.S. Income Tax Return.
 - Must submit 2019 Verification of Non-Filing Letter from the IRS
- I was employed during 2019 but will not file a 2019 U.S. Income Tax Return.
 - Must submit 2019 Verification of Non-Filing Letter from the IRS
 - Must submit W-2 forms for each employer or 1099-MISC
 - List below the names of all employers and the amount earned from each employer

Sources/Employer Name	2019 Income Amount
	\$
	\$
	\$

2. Indicate untaxed income received below and provide supporting documentation:

Sources of 2019 Untaxed Income					
Child Support	\$	Food Stamps	\$	Social Security Benefits	\$

E. SIGN

Each person signing this form certifies that all the information reported on it is complete and correct.

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

 Student Date
 (SIGN IN BLUE OR BLACK INK ONLY)

 Parent Date
 (SIGN IN BLUE OR BLACK INK ONLY)