

Independent Verification Worksheet 2022-2023

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 spouse(s)' 2020 IRS Tax Return Transcripts, 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 Responses & Sign in INK

Last Name	First Name	M.I.	Social Security #	
Address (includes a	npt. no.)		Date of Birth	
City	State	Zip Code	Phone Number	

B. FAMILY/HOUSEHOLD INFORMATION

List yourself (and spouse) and the people you/your spouse will provide more than half of their support for between **July 1, 2022 and June 30, 2023.**

1. Student: List yourself in the table below

CTUDENT INFODMATION

2. Your Spouse: If married, list your spouse in the table below and complete Section D.

3. Children:

- All dependent children you/your spouse provide more than half of their support. If you/your spouse do not provide more than half of their support, do NOT include them.
- Also, write in the name of the college for any children who will be attending college at least half-time between **July 1**, **2022 and June 30**, **2023** and will be enrolled in a degree or certificate program.

4. Other Member(s):

Include other people as part of your family only if:

- They live with you/your spouse and received more than half of their support from you/your spouse at the time you completed the FAFSA and
- They will continue to get more than half of their support from you/your spouse between **July 1, 2022 through June 30, 2023**.

Full Name	Age	Relationship	College	Enrolled At Least ½ Time?
		SELF	NAU	□ Yes □ No
				□ Yes □ No
				□ Yes □ No
				□ Yes □ No
				□ Yes □ No
				□ Yes □ No
				□ Yes □ No
				□ Yes □ No

If you need more space, attach a separate page.



C. STUDENT TAX INFORMATION

- 1. Check only one box below and submit required documentation:
 - o I am attaching a 2020 IRS Tax Return Transcript or a SIGNED 2020 U.S. Income Tax Return with all applicable schedules.
 - o I used the IRS Data Retrieval Tool to transfer my 2020 tax information on to my FAFSA.
 - o I was not employed. I will not file and am not required to file a 2020 U.S. Income Tax Return.
 - o I am attaching a 2020 Verification of Non-Filing Letter from the IRS.
 - o I was employed during 2020 but will not file a 2020 U.S. Income Tax Return.
 - o I am attaching a 2020 Verification of Non-Filing Letter from the IRS.
 - o I am attaching my 2020 W-2 from each employer or 1099-MISC
 - List below the names of all employers and the amount earned from each employer

Sources/Employer Name	2020 Income Amount
	\$
	\$
	\$

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

Sources of 2020 Untaxed Income					
Child Support	\$	Food Stamps	\$	Social Security Benefits	\$

D. SPOUSE TAX INFORMATION (IF APPLICABLE)

- 1. Check only one box below and submit required documentation:
 - o I am attaching a 2020 IRS Tax Return Transcript or a SIGNED 2020 U.S. Income Tax Return with all applicable schedules.
 - o I used the IRS Data Retrieval Tool to transfer my 2020 tax information on to my spouse's FAFSA.
 - o I was not employed. I will not file and am not required to file a 2020 U.S. Income Tax Return.
 - o I am attaching a 2020 Verification of Non-Filing Letter from the IRS
 - o I was employed during 2020 but will not file a 2020 U.S. Income Tax Return.
 - o I am attaching a 2020 Verification of Non-Filing Letter from the IRS
 - o I am attaching my 2020 W-2 from each employer or 1099-MISC
 - List below the names of all employers and the amount earned from each employer

Sources/Employer Name	2020 Income Amount
	\$
	\$
	\$

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

Sources of 2020 Untaxed Income					
Child Support	\$	Food Stamps	\$	Social Security Benefits	\$

E.	SI	lG.	1
----	----	-----	---

Each person signing this form certifies that all the information reported on it is complete and accurate.		WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.		
Student Signature (SIGN IN BLUE OR BLACK INK ONLY)	Date	Spouse Signature (SIGN IN BLUE OR BLACK INK ONLY)	Date	