



# Financial Aid Office 2024-2025 DEPENDENT VERIFICATION WORKSHEET Federal Student Aid Programs

**V5**  
Dependent  
Aggregate  
Verification

Your application was selected for review in a process called "Verification." In this process, the Financial Aid Office will compare information you provide with your FAFSA. The law requires each institution to collect and verify this information before awarding Federal aid. If there is a difference between your FAFSA and information on any of your verification documents, the college may ask for further information from you and/or make the correction electronically.

Complete this verification form and submit it to your financial aid administrator as soon as possible. The Financial Aid Office cannot process your application without this information.

## Student Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_  
 Student ID Number: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone number (###-###-####): \_\_\_\_\_

**\*A student is considered dependent if he/she was required to provide parental information on the FAFSA.**

List the people in your Family Size which includes the following:

- The student
- **Your legal parents who live together, even if they are not married (include information about both),**
- The student's parents (including a stepparent, even if the student is not living with them). Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces apart from the family.
- The student's siblings if the following are true: they live with student's parents (or live apart because of college enrollment), receive more than half of their support from the student's parents, and they will continue to receive more than half their support from the student's parents during the award year.
- Other people if the following are true: They live with the student's parents, they receive more than half of their support from the student's parents, and they will continue to receive more than half their support from the student's parents during the award year.
- The provided criteria for "dependent children" or "other persons" align with the requirement that family size align with whom the parent could claim as a dependent on a U.S. tax return if the parent were to file a U.S tax return at the time of completing the 2024-2025 FAFSA. As a result, the parent should not include any unborn children in the family size.

## Family Information

WRITE THE NAMES OF **ALL** FAMILY MEMBERS in the space(s) below. If you need more space, attach a separate page.

Full Name	Age	Relationship
<i>Missy Jones (example)</i>	<i>18</i>	<i>sister</i>
		<b>Self</b>

**Important Note:** The instructions below apply to the student and each parent included in the household. Notify the financial aid office if the parents filed separate IRS income tax returns for 2022 or had a change in marital status after December 31, 2022. As part of federal student aid eligibility, the student and parents will be required to consent and approve sharing and importing income and tax information from the IRS to the FAFSA form, even if the attempt to obtain or use such data is ineffective. In most cases, no further documentation is needed to verify 2022 income information that was transferred into the student's FAFSA. If 2022 income tax return information for the student or parents was not available, the student and parents should provide the institution with appropriate 2022 tax documents.

**Information for Tax Filers**

Complete this section if you filed a 2022 Income Tax Return

**Student:**

- I used the FA-DDX in the FAFSA to transfer tax data.
- I am attaching a signed copy of my 2022 IRS Tax Return Transcript – received from the IRS.
- I am attaching a signed copy of my 2022 Income Tax Return.
- I filed an amended (corrected) 2022 Tax Return. \*If taxes were amended, a signed 1040X must be submitted to the office.

**Parents: [applies to each parent included in the household.]**

- My parent(s) used the FA-DDX in the FAFSA transfer tax data.
- My parent(s) are attaching a signed copy of their 2022 IRS Tax Return Transcript – received from the IRS.
- My parent(s) are attaching a signed copy of their 2022 Income Tax Return.
- My parent(s) filed an amended (corrected) 2022 Tax Return. \*If taxes were amended, a signed 1040X must be submitted to the office.

**Information for Non-Tax Filers with Income**

Complete this section if you had income from employment and you did not or were not required to file 2022 Income Taxes

**Student:**

- I did not and was not required to file a 2022 Income Tax Return. I was employed in 2022 and have listed all employers and amount earned from each employer in 2022. [Provide copies of **ALL** 2022 IRS W-2 forms issued]. List every employer even if the employer did not issue an IRS W-2 form.

**Parents:**

- One or both parents did not and were not required to file a 2022 Income Tax Return. One or both parents were employed and have listed all employers and amount earned from each employer in 2022. [Provide copies of **ALL** 2022 IRS W-2 forms]. List every employer even if the employer did not issue an IRS W-2 form.

Employer's Name	IRS W-2 or an Equivalent Document Provided?	Annual Amount Earned in 2022
	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$
	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$

**Information for Non-Tax Filers With No Income**

I will not file and am not required to file a 2022 U.S. Income Tax Return.

**Student:**

- I did not and was not required to file a 2022 Income Tax Return. I was not employed and had no income earned from work in 2022. I will explain below how my living expenses were met.

**Parents:**

- One or both parents did not and were not required to file a 2022 Income Tax Return. One or both parents were not employed and had no income earned from work in 2022. They will explain below how their living expenses were met.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Student – Identity Verification

I am appearing in person with my valid government-issued photo identification (driver's license, state identification card, or passport). The Financial Aid Office will maintain a copy of your photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect your ID.

**FAO use only:**  Made copy  Date Stamped  Staff signed

I am attaching a notarized copy of my valid government-issued photo identification (unexpired driver's license, state identification card, or passport)

## Student – Statement of Educational Purpose

I am appearing in person to sign the statement below (**must** sign statement in front of financial aid staff).

I am unable to appear in person to submit the below statement and have had the statement notarized (Community Colleges of Spokane does not reimburse for any fees associated in the notarizing process).

I certify that I \_\_\_\_\_ (Student's name) am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending \_\_\_\_\_ (Name of Postsecondary Institution) for 2024-2025 academic year.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student ID Number

### Notary's Certificate of Acknowledgement

**\*\*This section cannot be completed by an electronic notary service\*\***

State of \_\_\_\_\_ City/County of \_\_\_\_\_ On \_\_\_\_\_, before me,  
(Date)

\_\_\_\_\_ personally appeared, \_\_\_\_\_, and provided to me on  
(Notary's Name) (Print Student Name)  
basis of satisfactory evidence of identification \_\_\_\_\_ to be the above-named person who signed the  
(Type of government-issued photo ID provided)  
foregoing instrument.

**WITNESS my hand and official seal**  
(seal)

\_\_\_\_\_  
(Notary signature)

My commission expires on \_\_\_\_\_  
(Date)

## Sign the Worksheet

I affirm that the information provided in this application and other financial aid documents is true and correct to the best of my knowledge. In order to receive financial aid for the 2024-2025 academic year, I agree that I have reviewed, understand and agree to the conditions, responsibilities and obligations as stated in the Award Terms and Conditions and Satisfactory Academic Progress Policy, available on the Financial Aid website.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

### Spokane Community College

1810 N Greene Street • MS 2152 • Spokane WA 99217

Fax: 509-533-7425

Website: [www.scc.spokane.edu](http://www.scc.spokane.edu)

E-mail: [fsc@fcc.spokane.edu](mailto:fsc@fcc.spokane.edu)

### Spokane Falls Community College

3410 W Whistalks Way • MS 3172 • Spokane WA 99224

Fax: 509-533-3547

Website: [www.sfcc.spokane.edu](http://www.sfcc.spokane.edu)

E-mail: [sfcc.finaid@sfcc.spokane.edu](mailto:sfcc.finaid@sfcc.spokane.edu)

Community Colleges of Spokane does not discriminate on the basis of race, color, religion, national origin, sex, disability, sexual orientation or age in its programs, activities or employment. Direct all inquiries regarding equal opportunity compliance and/or grievances to chief strategy and administration officer, CCS, 501 N. Riverpoint Blvd., P.O. Box 6000, MS1004, Spokane, Wash. 99217-6000. Direct all inquiries or grievances regarding access and Title IX to the chief compliance officer, 2917 W. Whistalks Way, MS 3027, Spokane, Wash. 99224.