

2026-2027 Verification Worksheet
Independent Student - Tracking Group V1

Your 2026-2027 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your parents reported on your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA 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.

Complete **both sides** of this form.

A. STUDENT INFORMATION

Last Name		First Name	M.I.
Street Address		City	State
Code			Zip
Date of Birth		Cell Phone	Home Phone
Email			

B. FAMILY INFORMATION

List the people in your household, include:

- **Youself** and your **spouse**, if applicable, and
- Your and your spouse's **children** if, you and your spouse will provide more than half of their support from July 1, 2026 through June 30, 2027, even if the children do not live with you, and
- **Other people** if they now live with you and your spouse and you provide and will continue to provide more than half of their financial support from July 1, 2026 through June 30, 2027

Also write in the name of the college for any household member who will be attending at least half-time between July 1, 2026 and June 30, 2027, and will be enrolled in a degree, diploma, or certificate program at an eligible postsecondary educational institution.

If you need more space, attach a separate page.

[illegible]

C. HOUSEHOLD INCOME INFORMATION AND TAX FILING STATUS

Please select ONE box only:

- ☐ I (the student and spouse, if applicable) have already filed and used the Direct Data Exchange (DDX) on the FAFSA to transfer my 2024 tax information.
- ☐ I (the student and spouse, if applicable) have attached a copy of my signed 2024 IRS Federal Tax Return including IRS Schedules 1,2 and 3 or 2024 Tax Return Transcripts with my CCC ID on all pages.
- ☐ I (the student and spouse, if applicable) was not employed and had no income from work in 2024. Provide documentation from the IRS or other relevant tax documents dated on or after October 1, 2025 that indicates a 2024 IRS income tax return was not filed with the IRS or other relevant tax authority.
- ☐ I (the student and spouse, if applicable) was employed in 2024 but am not required to file a 2024 Tax Return with the IRS. Submit W-2s and/or 1099s from each employer.

Employer's Name	IRS W-2 Provided?	Annual Amount in 2024
(Example) ABC's Auto Body	Yes	\$4500

D. SIGN THIS WORKSHEET

The College must review the requested information. Under the financial aid program rules (CFR title 34, Part 668). If you are the student, by signing this application you certify that you (1) will use federal and/or state student financial aid only to pay the cost of attending an institution of higher education, (2) are not in default on a federal student loan or have made satisfactory arrangements to repay it, (4) will notify your school if you default on a federal student loan and (5) will not receive a Federal Pell Grant for more than one school for the same period of time. If you are the spouse or the student, by signing this application you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include U.S. or state income tax forms that you filed or are required to file. Also, you certify that you **understand that the Secretary of Education has the authority to verify the information reported on this application with the Internal Revenue Service and other federal agencies.** If you sign any document related to the federal student aid programs electronically using a

Personal Identification Number (PIN), you certify that you are the person identified by the PIN and have not disclosed that PIN to anyone else.

**WARNING: If you purposely give false or misleading information on the worksheet,
you may be fined \$20,000, sent to prison, or both.**

****Student Signature:** _____ **Date:** _____

****Spouse Signature (Optional):** _____ **Date:** _____

****Acceptable signatures include a "wet" or hand-written signature, a signature completed by stylus or using your finger and an electronic signature (through Adobe, DocuSign or other electronic signature applications). Typed or cursive signatures will not be accepted.**

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the financial aid administrator at your school.