



2023–2024 Verification V5 Worksheet Independent Student

Your application was selected for review, or “verification.” We are required by federal law (34 CFR, Part 668) to compare the information from your Free Application for Federal Student Aid (FAFSA) with the information provided on this form. Please complete the entire form and ensure both the student and one parent whose information is included sign the form. **Incomplete forms will be returned to you. No determination of aid eligibility can be made until all requested documents are received and reviewed.**

1. If you used the IRS Data Retrieval tool when completing the FAFSA and *did not* make any changes to that information, a 2021 tax return transcript is not necessary.
2. If you did not use the IRS Data Retrieval tool or you made changes after the IRS Retrieval, contact the IRS at www.irs.gov or call 1-800-908-9946 to obtain a 2021 Tax Return Transcript or submit a signed copy of your Tax Return.
3. Complete all sections and sign the worksheet – you and one parent must sign the worksheet.
4. If you did not file or are not required to file an IRS 1040, you must affirm that you are not required to file an IRS 1040 and include a copy of 2021 W-2 Forms from all employers.

A. STUDENT INFORMATION (PLEASE PRINT OR TYPE)

Student’s Last Name	First Name	M.I.	Last 4 digits of SSN
Street Address (include apt. no.)		Date of Birth	
City	State	Zip Code	Email Address
Cell Phone Number			

B. FAMILY INFORMATION

Number of household Members: List below the people in the student’s household. Include:

- The student.
- The student’s spouse, if the student is married.
- The student’s or spouse’s children if the student or spouse will provide more than half of the children’s support from July 1, 2023 through June 30, 2024, even if a child does not live with the student.
- Other people if they now live with the student and the student or spouse provide more than half of that person’s support through June 30, 2024.

Number in College: Include in the space below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2023, and June 30, 2024 and include the name of the college.

If more space is needed, provide a separate page with the student’s name and ID number at the top.

Full Name	Age	Relationship	College	Will be enrolled at least Half Time (YES or NO)
		Self	NWOSU	

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

C. TAX FORMS AND INCOME INFORMATION - Check the appropriate boxes below

TAX FILERS Check the space for those that provided or will provide a 2021 tax return transcript (Contact the Internal Revenue Service at 1-800-908-9946 or www.irs.gov to request a tax return transcript).

You Your Spouse Your Parent 1 or (Step-parent) Your Parent 2 or (Step-parent)

TAX-FILERS Check the space for those that *Filed* a 2021 tax return and used the IRS Data Retrieval Tool on the FAFSA.

You Your Spouse Your Parent 1 or (Step-parent) Your Parent 2 or (Step-parent)

NON-TAX FILERS: DID NOT WORK and DID NOT FILE TAXES IN 2021.

You Your Spouse Your Parent 1 or (Step-parent) Your Parent 2 or (Step-parent)

NON-TAX FILERS: WORKED but DID NOT FILE; Check the space for those who DID NOT FILE 2021 Federal Income Tax Return and are not required to, list below the employer(s) and all income received in 2021.

Provide a list of your employer(s) and any income received in 2021. (Provide W-2 forms or other earning statements).

You Your Spouse Your Parent 1 or (Step-parent) Your Parent 2 or (Step-parent)

***FOR NON-TAX FILERS ONLY**

Employer's Name	Income Earned From Work for Student	Income Earned From Work for Mother	Income Earned From Work for Father
<i>Suzy's Auto Body Shop (example)</i>	\$2000.00		

D. Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Print Student's Name

Student's ID Number

Student's Signature

Date

You should make a copy of this worksheet for your records.

Complete, print, sign and return to Financial Aid at:

Northwestern Oklahoma State University
Financial Aid
709 Oklahoma Blvd.
Alva, Ok 73717
NWOSU School Code: 003163
Fax: 580-327-8177

**Identity and Statement of Educational Purpose
(To Be Signed at the Institution)**

The student must appear in person at _____ to
(Name of Postsecondary Educational Institution)

verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

**Identity and Statement of Educational Purpose
(To Be Signed in the presence of a Notary)**

If the student is unable to appear in person at _____
(Name of Postsecondary Educational Institution)

to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to a driver's license, other state-issued ID, or passport.
- (b) The original notarized Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Statement of Educational Purpose

I certify that I _____ am the individual signing this
(Print Student's Name)

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

_____ for 2023-2024.
(Name of Postsecondary Educational Institution)

(Student's Signature)

(Date)

(Student's ID Number)

NWOSU Employee witnessing signature

(Date)

Notary's Certificate of Acknowledgement

Notary's certification may vary by State

State of _____

City/County of _____

On _____, before me, _____,

(Date)

(Notary's name)

personally appeared, _____, and proved to me

(Printed name of signer)

because of satisfactory evidence of identification _____

(Type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(seal)

(Notary signature)

My commission expires on _____

(Date)

For Statement of Educational Purpose

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct.

WARNING: If you purposely give false or misleading information you may be fined, be sent to prison, or both.

Print Student's Name

Student's ID Number

Student's Signature (Required)

Date

Spouse's Signature (Optional)

Date