

## 2021-2022 Verification Worksheet Federal Student Aid Programs College of Micronesia-FSM

INDEPENDENT STUDENT Tracking Group

V1

Your 2021–2022 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called <u>verification</u>. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information we will compare 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 COM-FSM Financial Aid Office. If you have questions about verification, contact the nearest COM-FSM Financial Aid Office as soon as possible so that your financial aid will not be delayed.

A. Independent Student's Information				
Student's Last Name	Student's First Name	Student' M.I Student's SS/ID Number		
Student's Mailing Address (P.O Box City, Stat	e, Zip Code)		Student's Date of Birth	Home Phone

## **B.** Independent Student's Family Information

Number of Household Members: List below the people in your <u>household</u>. Include:

- Yourself
- Your spouse, if you are married
- Your children, if any, if you provide more than half of their support from July 1, 2021, through June 30, 2022, or if the child would be required to provide your information if they were completing a FAFSA for 2021–2022. Include children who meet either of these standards even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2022.

Write the names of all family members. Include the name of the college for any household member, excluding your parents, who is, or will be, enrolled <u>at least half time</u> in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2021, and June 30, 2022.

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)
Missy Jones (example)	18	Sister	Central University	Yes
		Self		

**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.

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Student Name:		SS/ID Number:		
C. Independent Student's Income Inf 1. U.S TAX RETURN FILERS	ormation to Be Verified			
I, the student, completed a 2019 t	ax return. A copy is attached. If you did	not file a tax return, complete	Item #3 below.	
If more space is needed, attach a separate	e page with the student's name and Soc	ial Security Number at the top.		
Employer's	Name	2019 Amount Ear	ned IRS W	V-2 Attached?
ABC Shipping (example)		\$1,280	Yes	
Note: We may require you to provide doc	umentation from the IRS that indicates	a 2019 IRs income tax return w	vas not filed with the	e IRS
2. NON U.S TAX RETURN FILERS	amentation from the mo that maleates	a 2015 instruction tax retain w	ras not mea with the	
copy is attached. If you did not file  If more space is needed, attach a separate				
Employer's	Name	2019 Amount Ear	i i	V-2 Attached?
ABC Shipping (example) Student:		\$1,280	Yes	
Spouse:				
I, the student, (and, if married, the arned from each employer in 20	e student's spouse) was not employed a e student's spouse) was employed in 2 19, and whether an IRS W-2/wage stat	nd had no income earned from 019 and has listed below the r ement form is attached. Provi	n work in 2019. names of all employ de copies of all 201	ers, the amount 9 IRS W-2/wage
2/statement form.	id, if married, the student's spouse) by o	employers. List every employer	even if they did not	issue an IRS W-
the person who paid the child suppo	se, if married, paid for child support in 2 to is listed in Section B of this worksheet rt, the name of the person to whom the lal amount of child support that was paidled support.	, paid child support in 2019. I h child support was paid, the na d in 2019 for each child. If aske	mes of the children ed by my school, I wi	for whom child
Name of Person Who Paid	Name of Person to Whom	Name of Child for Whom	Amount of	
Child Support	Child Support was Paid	Support	Child Support	
Marty Jones	Chris Smith (example)	Terry Jones	\$6,000	!
				]

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## E. Certification and Signatures By signing this worksheet you certify that all of 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, be sentenced to jail, or both. The student must sign and date. Student's Signature Date

Date

Spouse's Signature (optional)