

## 2022-2023 Verification Worksheet Federal Student Aid Programs College of Micronesia-FSM

## DEPENDENT STUDENT Tracking Group

**V1** 

Your 2022–2023 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 and your parents 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 and at least one parent 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. Dependent 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, State	ce, Zip Code)		Student's Date of Birth	Home Phone	

## B. Dependent Student's Family Information

Number of Household Members: List below the people in the parents' household. Include:

- Yourself and parent(s) (including a stepparent) even if you don't live with your parent(s).
- Your parent(s)' other children if the parent(s) will provide more than half of the children's support from July 1, 2022, through June 30, 2023, or if the other children would be required to provide parental information if they were completing a FAFSA for 2022–2023. Include children who meet either of these standards even if the children do not live with your parent(s).
- Other people if they now live with your parent(s) and the parent(s provide more than half of the other people's support and will continue to provide more than half of their support through June 30, 2023.

Number in College: Please include in the space below information about any household member, excluding the parents, who is, or will be, enrolled at <u>least half time</u> in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2022, and June 30, 2023, 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)
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.

Student Name:	SS/ID Number:	SS/ID Number:		
C. Dependent <u>Student's Income</u> Information to Be Verified				
U.S TAX RETURN FILERS				
1. U.S TAX RETURN FILENS				
I, the student, completed a 2020 tax return. A copy is attached. If you did	not file a tax return, complete Item #3 b	pelow.		
If more space is needed, attach a separate page with the student's name and Soci	ial Security Number at the top.			
Employer's Name	2020 Amount Earned	IRS W-2 Attached?		
ABC Shipping (example)	\$1,280	Yes		
Note: We may require you to provide documentation from the IRS that indicates	a 2020 IRs income tax return was not fi	led with the IRS.		
2. NON U.S TAX RETURN FILERS				
2. NON 0.5 TAX RETURN FILERS				
I, the student, completed a 2020 foreign tax return or a tax return with an		Associated States (FAS). A		
copy is attached. If you did not file a tax return, complete Item #3 below.				
If more space is needed, attach a separate page with the student's name and Soci	ial Security Number at the top .			
Employer's Name	2020 Amount Earned	IRS W-2 Attached?		
ABC Shipping (example)	\$1,280	Yes		
	2002 ID			
<b>Note:</b> We may require you to provide documentation from the IRS that indicates	a 2020 IRs income tax return was not ti	led with the IKS.		
3. TAX RETURN NONFILERS (including non-working)	in the IDC and any other according	•		
Complete this section if you did not file and <u>is not required</u> to file a 2020 income	tax return with the IKS or any other gov	ernment agency.		
Check the box that applies:				
I, the student, was not employed and had no income earned from work in	າ 2020.			
I, the student, was employed in 2020 and has listed below the names of a	all ampleyers the amount parned from	each amployer in 2020, and		
whether an IRS W-2/wage statement form is attached. Provide copies of				
employers. List every employer even if they did not issue an IRS W-2/state	= = = = = = = = = = = = = = = = = = = =			
D. <u>Parent's Income</u> Information to Be Verified				
1. U.S TAX RETURN FILERS				
The student's, parent completed a 2020 tax return. A copy is attached. If	the parent(s) did not file a tax return, co	omplete Item #3 below		
If more space is needed, attach a separate page with the student's name and Soci		·		
if more space is needed, ditacin a separate page with the stadent's name and soci	iai security ivarriber at the top.			
Employer's Name	2020 Amount Earned	IRS W-2 Attached?		

Note: We may require you to provide documentation from the IRS that indicates a 2020 IRs income tax return was not filed with the IRS.

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## 2. NON U.S TAX RETURN FILERS

The student's, parent completed a 2020 foreign tax return or a tax return with another U.S territory or one of the Freely Associated States. A copy is attached. If the parent(s) did not file a tax return, complete **Item #3** below.

If more space is needed, attach a separate page with the student's name and Social Security Number at the top.

		IRS W-2
Employer's Name	2020 Amount Earned	Attached?
Pro Auto	\$980	Yes
Parent 1:		
Parent 2:		

Note: We may require you to provide documentation from the IRS that indicates a 2020 IRs income tax return was not filed with the IRS.

	( RETURN NONFILERS (including non-working) ete this section if the student's parent(s) will not file and is not required to file a 2020 income tax return with the IRS or other government (.
Check	the box that applies:
	Neither parent was employed, and neither had income earned from work in 2020.
	One or both parents were employed in 2020 and have listed below the names of all employers, the amount earned from each employer in 2020, and whether an IRS W-2/wage statement form is provided. Provide copies of all 2020 IRS W-2/wage statement forms issued to the parents by their employers. List every employer even if they did not issue an IRS W-2/wage statement form.

Student Name:		SS/ID Number:		
E. Parent's Other Information Complete this section if one or bo	to Be Verified oth of the student's parent(s) paid for	or child support in 2020.		
1. SNAP Benefits, check the box:				
One of the persons listed i	n the household received SNAP ben	efits in 2020.		
<b>Note:</b> If we have reason to believe from the agency that issued the S	e that the information regarding the NAP benefits in 2020.	receipt of SNAP benefits is inaccu	rate, we may require docu	mentation
2. Child Support Paid, check the	box:			
parent(s) household. Prov the child support was paid that was paid in 2020 for e	nt's parents included in the householde in the space below the names of the children each child.  Separate page that includes the students.	f the persons who paid the child s for whom child support was paid, a	upport, the names of the and the total annual amou	persons to whom
Name of Person Who Paid	Name of Person to Whom	Name of Child for Whom	Age of Child for	Amount of
Child Support	Child Support was Paid	Support	Whom Support Was	Child Support
Joe Jones	Jane Doe	Jake Jones	5	\$6,000
				L
<ul> <li>A signed statement from</li> <li>Copies of the child supp</li> <li>F. Certification and Signature</li> </ul> Each person signing this workshee	e that the information regarding ch in the individual receiving the child s port payment checks, money order re is et certifies that all of the information on this worksheet, you may be fined	upport certifying the amount of checeipts, or similar records of electrons.  The reported on it is complete and co	ild support received; or onic payment having been preceded with the process of th	ı made. urposely give
date.			•	
Student's Signature		Date		
Parent's Signature		Date		