# 2022–2023 Aggregate Verification Worksheet Dependent Student

Your 2022–2023 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. To verify that you provided correct information the financial aid administrator at your school 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 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.

Student's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number
Student's Street Address (in	nclude apt. no.)		Student's Date of Birth
City	State Zip Code		Student's Email Address
Student's Phone Number (include area code)			Student's RSC ID number

#### B. Dependent Student's Family Information

List below the people in your <u>parent(s)</u>' household. Include:

A. Dependent Student's Information (Please print clearly)

- Yourself and your parent(s) (including a stepparent) even if you don't live with your parent(s).
- Your parent(s)' other children if your parent(s) will provide more than half of their 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 they do not live with your parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2023.

Include the name of the college for any household member, excluding your parent(s), who will be enrolled, at least half time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2022, and June 30, 2023. If more space is needed, attach a separate page with the student's name and Social Security Number at the top.

Full Name	Age	Relationship	College	Will be Enrolled at
				Least Half Time
Missy Jones (example)	18	Sister	Central University	Yes
		Self		

Student's Name:	Student ID:	
C. Dependent Student's Income Information	on to Be Verified	
1. TAX RETURN FILERS—Important Note: I financial aid administrator before completing th	If the student filed an <u>amended</u> 2020 IRS tax return, the his section.	student must contact the
<b>Instructions</b> : Complete this section if the	the student filed a 2020 income tax return with	the IRS.
If you filed taxes, check ONE bo	ox that applies:	
	al Tool in FAFSA on the Web to retrieve and transfer 20 FSA or when making a correction to FAFSA.	020 IRS income information
Student's 2020 signed federal tax return (10	040) and all filed schedules OR an IRS tax transcript is	attached to this worksheet.
2. <b>TAX RETURN NONFILERS</b> —Complete this return with the IRS.	is section if the student, will not file and is not required	to file a 2020 income tax
If you did not file taxes, check O	ONE box that applies:	
The student was not employed and had no	income earned from work in 2020.	
each employer in 2020, and whether an IRS	s listed below the names of all the student's employers, S W-2 form is attached. Attach copies of all 2020 IRS V even if they did not issue an IRS W-2 form. If more space Social Security Number at the top.	W-2 forms issued to the
Employer's Name	2020 Amount Earned	IRS W-2 Attached?
Suzy's Auto Body Shop (example)	\$2,000.00(example)	Yes(example)

Student's Name:	Student ID:	
D. Parent's Income Information to Be Verified - Note: If t instructions and certifications below refer and apply to both page 1.		of this worksheet, the
1. TAX RETURN FILERS—Important Note: If the student's financial aid administrator must be contacted before completing		ax return the student's
<b>Instructions:</b> Complete this section if the student's the IRS.	parent(s) filed or will file a 2020	) income tax return with
If you filed taxes, check ONE box that app	olies:	
The student's parent <u>has used</u> the IRS Data Retrieval Too into the student's FAFSA, either on the initial FAFSA or		
The student's parent has attached a 2020 IRS Tax Transcr to this worksheet.	ript OR signed 2020 federal tax return (	1040) and all filed schedules
<ol><li>TAX RETURN NONFILERS—complete this section if income tax return with the IRS.</li></ol>	the student's parent(s) will not file and	is not required to file a 2020
If you did not file taxes, check ONE box the	nat applies:	
The parent(s) was not employed and had no income earne	d from work in 2020.	
The parent(s) was employed in 2020 and has listed below each employer in 2020, and whether an IRS W-2 form is a parent(s) by employer(s). List every employer even if they separate page with the student's name and Social Security	attached. Attach copies of all 2020 IRS did not issue an IRS W-2 form. If more	W-2 forms issued to the
Employer's Name	2020 Amount Earned	IRS W-2 Attached?
Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Yes (example)

E. Identity and Statement of Educational Pu	ırpose (To Be Signed	d at the Institution)
The student <i>must appear in person</i> at <u>Russell Sag</u> his or her identity by presenting a valid government but not limited to, a driver's license, other state-issu a copy of the student's photo ID that is annotated by reviewed, and the name of the official at the institution	-issued photo identificed ID, or passport. They the institution with the	eation (ID), such as, ne institution will maintain ne date it was received and
In addition, the student must sign, in the present	ce of the institutional	I official, the Statement of
Educational Purpose provided below.		
Statement of Ed	lucational Purpose	
I certify that I	student financial assista	ince I may receive
STUDENT SIGNATURE	DATE	STUDENT ID NUMBER
SIGNATURE of AUTHORIZED SAGE OFFICIAL	DATE	
RSC Employee check which document is copied for revieDriver's LicenseNon-Driving State ID _ Note: If other, contact Financial Aid Office to verify its accepta	Military ID	Passport
Certification and Signatures – Must be comp  Each person signing this worksheet certifies that all of the information reported on it is complete and correct.  The student and one parent must sign and date.	WARNING: If you purpos	ely give false or misleading sheet, you may be fined, be
Student's Signature	Date	
Parent's Signature	Date	

Student's Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Return completed form to and supporting documentation: Russell Sage College, Attn: Financial Aid Office, 65 First Street, Troy, NY 12180

## STOP! Complete this page ONLY if student <u>did not</u> complete Section E of the verification worksheet.

### Identity and Statement of Educational Purpose (To Be Signed With Notary)

If the student is unable to appear in person at Russell Sage College 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; (please have notary sign the copy of the government issued Identification) AND
- **(b)** The original 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(Print Student's Name)	_ am the individual signing this
	ederal student financial assistance I may receive will only be used
STUDENT SIGNATURE	DATE
STUDENT ID NUMBER	
Notary's Certificate of Acknowledgement	
State of	
City/County of	
On, before me,	, (Notary's name)
personally appeared,(Printed name	, and provided to me ne of signer)
because of satisfactory evidence of identification	(Type of unexpired government-issued photo ID provided)
to be the above-named person who signed the fo	pregoing instrument.
WITNESS my hand and official seal (seal)	
	(Notary signature)
	My commission expires on (Date)

Return completed form to and supporting documentation: Russell Sage College, Attn: Financial Aid Office, 65 First Street, Troy, NY 12180