

# NAZARETH UNIVERSITY

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## 2024-2025 Verification Worksheet Form (Dependent Student)

Your application was selected for Verification. This is to confirm that information reported on the FAFSA is accurate. In addition to submitting this *Family Size Form* you are required to provide income documentation.

**Failure to provide the required verification documentation by the deadline may result in the forfeit of your eligibility to receive federal financial aid.**

Please complete Sections A-D **and** submit requested income documentation.

**Student Name:** \_\_\_\_\_ **Nazareth ID:** \_\_\_\_\_

### SECTION A: Family Information

**Contributor(s) in the family (including a stepparent):** If your legal parents (biological or adoptive parents) are married to each other, or are not married to each other and live together, you should report information about both of them.

Contributor 1 (include stepparent) in your Family	Age
Name:	

Contributor 2 (include stepparent) in your Family	Age
Name:	

List other family members below. Include:

- Yourself, even if you do not live with your parents (contributors).
- Exclude a parent who has died or is not living in the household because of separation or divorce.
- Include a parent who is on active duty in the U.S. Armed Forces apart from the family;
- Your contributor's (or contributors') other children, even if they do not live with your contributor (or live apart because of college enrollment), if:
  - Your contributor will provide more than half of their support from July 1, 2024 through June 30, 2025, or
  - The children will be required to provide the contributor's information when completing the FAFSA; and:
- Other people if they now live with your contributor(s) and your contributor(s) provides more than half of their support and will continue to provide more than half of their support from July 1, 2024 through June 30, 2025.
- Do not include any unborn children in the family size.

Names of Family Members	Age	Relationship (Do Not Report "Other")
STUDENT	ON FILE	SELF

**SECTION B: Parent Income Information – please check one box in either section #1 or #2.**

1. 2022 Income Tax Filer – make **one** selection:

- I successfully completed the Direct Data Exchange (DDX) process either on the initial FAFSA or when making corrections to the FAFSA. **Go to SECTION C.**
- I did not/could not use the DDX process and have attached a **signed** copy of my 2022 IRS Federal Income Tax Return **and** Schedules 1, 2, and 3 (if filed). **Go to SECTION C.**
- I filed a foreign income tax return and have attached a **signed** copy of my 2022 return. **Go to SECTION C.**

2. 2022 Non-Filer/Not Required to File – make **one** selection:

- I was not employed and had no income earned from work in 2022. **Go to SECTION C.**
- I was employed in 2022. Please list below the names of all employers and the amount earned from each employer in 2022. Attach copies of **all** 2022 IRS W-2 forms issued by your employer(s). **Go to SECTION C.**

Employer's Name	Annual Amount Earned in 2022
	\$
	\$

**SECTION C: Student Income Information – please check one box in either section #1 or #2.**

1. 2022 Income Tax Filer – make **one** selection:

- I successfully completed the Direct Data Exchange (DDX) process either on the initial FAFSA or when making corrections to the FAFSA. **Go to SECTION D.**
- I did not/could not use the DDX process and have attached a **signed** copy of my 2022 IRS Federal Income Tax Return **and** Schedules 1, 2, and 3 (if filed). **Go to SECTION D.**
- I filed a foreign income tax return and have attached a **signed** copy of my 2022 return. **Go to SECTION D.**

2. 2022 Non-Filer/Not Required to File – make **one** selection:

- I was not employed and had no income earned from work in 2022. **Go to SECTION D.**
- I was employed in 2022. Please list below the names of all employers and the amount earned from each employer in 2022. Attach copies of **all** 2022 IRS W-2 forms issued by your employer(s). **Go to SECTION D.**

Employer's Name	Annual Amount Earned in 2022
	\$
	\$

**SECTION D: Statement of Certification and Signature**

The information provided on this form is true and complete to the best of my knowledge. I agree to provide additional documentation if requested. I further agree to notify your office of any error or omission. I understand that failure to comply with this agreement could result in forfeiture of financial aid.

\_\_\_\_\_  
Student (not electronic or digital)                      Date

\_\_\_\_\_  
Parent (not electronic or digital)                      Date

Once you complete this form, please email it to our office at [finaid@naz.edu](mailto:finaid@naz.edu), mail a paper copy or bring the form to our office, located in Smyth Hall 43.

**WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to prison, or both.