

STUDENT AID & SCHOLARSHIPS
DEPENDENT Student Verification Worksheet 2026-2027
V5 AGGREGATE

You must appear in person and provide a Student Aid & Scholarships staff member your physical and valid, government-issued photo ID **AND** sign in the presence of a Student Aid & Scholarships staff member. If you are unable to appear in person, you must contact the Student Aid & Scholarships office for further instructions.

The Student Aid & Scholarships office cannot process your application without this information.

Federal Student Aid Programs: Your application was selected for review in a process called verification. In this process, the Student Aid & Scholarships Office will be comparing information from your FAFSA with you and your parent's official financial documents and confirm your identity. The law states that before awarding student aid, our office is required to confirm and verify the information you and your parents reported on your FAFSA. If there are differences, then corrections to your FAFSA information may be required. To avoid delays in processing your financial aid, you and at least one parent must complete, sign, and submit this worksheet along with any additional required documents.

A: Student Information

Last *First* *SSN* *STU ID#*

Email *Date of Birth* *Phone*

B: Dependent Household Information

In the table below include:

- Yourself
- Your parent(s) (including stepparent) even if you don't live with them
- Your parents' other dependent (under age 24) children, even if they don't live with your parent(s), if your parents will provide more than half of their support from July 1, 2026 through June 30, 2027.

Include other people as part of your parents' household ONLY if:

- They now live with your parents, **and** your parents provide more than half of their support **and** will continue to provide more than half of their support from July 1, 2026 through June 30, 2027. Documentation may be required.

List yourself first, then **all** household members supported by your parents (do not include boyfriend/girlfriend or fiancés). If any household member, excluding your parent(s), will be attending college at least half time in a degree or certificate program, include the name of the college. If you need more space, attach a separate page.

Full Name	Age	Relationship	If enrolled in college from 07/01/25 – 06/30/26, name of college.
		Self	Clover Park Technical College

C: Student and Parent Tax and Income Information

Check only one box below for Student AND only one for Parent:

You can correct your FAFSA online at <https://studentaid.gov> by using the IRS Data Retrieval Tool—this is faster than providing signed copies of your 1040 tax documents. If you are unable to use the tax DRT or you are a recent victim of tax identity theft, please provide the appropriate document listed below.

STUDENT	
<input type="checkbox"/>	I used the IRS Data Retrieval Tool on the FAFSA. If you used the IRS Data Retrieval Tool, <i>and did not change the information</i> , you do not need to submit copies of your 1040 tax documents. <i>Note</i> : any manually entered tax data is considered a change for FAFSA purposes.
<input type="checkbox"/>	I am attaching my 2024 signed copy of my 1040 tax return , or tax return transcript.
<input type="checkbox"/>	I filed an amended 2024 Tax Return. If you select this option you must submit a signed copy of your 1040 tax return document and a signed copy of your 1040X.
<input type="checkbox"/>	I did not file a 2024 Tax Return AND I am not required to file a Tax Return. If you select this option, list your employer(s) and all income earned, and attach W-2s or Wage & Earnings Statement from the IRS.
<input type="checkbox"/>	I did not file a 2024 Tax Return and did not have earnings in 2024.
Employer	Earnings/Income
	\$
	\$
	\$

PARENT	
<input type="checkbox"/>	I used the IRS Data Retrieval Tool on the FAFSA. If you used the IRS Data Retrieval Tool, <i>and did not change the information</i> , you do not need to submit copies of your 1040 tax documents. <i>Note</i> : any manually entered tax data is considered a change for FAFSA purposes.
<input type="checkbox"/>	I am attaching my 2024 signed copy of my 1040 tax return , or tax return transcript.
<input type="checkbox"/>	I filed an amended 2024 Tax Return. If you select this option you must submit a signed copy of your 1040 tax return document and a signed copy of your 1040X.
<input type="checkbox"/>	I did not file a 2024 Tax Return AND I am not required to file a Tax Return. If you select this option, list your employer(s) and all income earned, and attach W-2s or Wage & Earnings Statement from the IRS.
<input type="checkbox"/>	I did not file a 2024 Tax Return and did not have earnings in 2024.
Employer	Earnings/Income
	\$
	\$
	\$

Enter the amounts of earned and/or untaxed income and benefits you received from January 1, 2024 – December 31, 2024.
Enter **zero** when appropriate. **DO NOT LEAVE ANY ITEM BLANK**

STUDENT	Enter YEARLY Amounts	PARENT
\$	IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040- Schedule 1 Line 15 plus 19.	\$
\$	Tax exempt interest income from IRS Form 1040-line 2a.	\$
\$	Untaxed portions of IRA distributions and Untaxed portions of pensions from IRS Form 1040-lines (4a + 5a) minus (4b + 5b). Exclude rollovers. If negative, enter a zero here.	\$
\$	Education Credits (American Opportunity, Hope of Lifetime Learning tax credits) from IRS form 1040-line Schedule 3 line 3.	\$

D: Required Signatures

I affirm that the information provided in this application and other Student Aid & Scholarships documents is true and correct to the best of my knowledge. I agree that I have reviewed, understand and agree to the conditions, responsibilities and obligations in order to receive financial aid for the 2026-2027 academic year. I understand if I purposely give false or misleading information on this form, I may be fined, sentenced to prison, or both.

Student Name: _____ **Signature:** _____ **Date:** _____

Parent Name: _____ **Signature:** _____ **Date:** _____

E: Student Verification of Identity

I affirm that the information provided in this application and other Student Aid & Scholarships documents is true and correct to the best of my knowledge. My signature attests that I confirmed my identity and complied with written laws and financial aid requirements. I agree that I have reviewed, understand and agree to the conditions, responsibilities and obligations in order to receive financial aid for the 2026-2027 academic year as stated in the Conditions of Award Packet and Satisfactory Academic Progress Policy available on the Student Aid & Scholarships website. I understand if I purposely give false or misleading information on this form, I may be fined, sentenced to prison, or both.

Student Name: _____ **Signature:** _____ **Date:** _____

FOR OFFICE USE: STAFF SIGNATURE REQUIRED

Witnessing Student Aid & Scholarships Staff Member's Signature

Date ****Copy of valid government issued photo identification required. ****