**Student Financial Services Office**

**420 West Main Street ∙ Danville, VA 24541**

**Phone: 1-800-AVERETT ∙ Fax: 434-791-5647**

**2021-2022 Verification Worksheet**

**Dependent Student (V1)**

**INSTRUCTIONS**

1. If you did not use the IRS Data Retrieval Tool on your FAFSA, you must submit a 2019 tax return transcript from the IRS. **Per federal regulations, a copy of your federal tax return is no longer acceptable.**
2. Complete all sections of the worksheet and provide the required signatures.
3. Deliver, mail or fax the completed worksheet, tax return transcript and any other documents to the Student Financial Services office in order for your financial aid to be processed.

**Section A. Student Information – (Please enter your information in the spaces provided.)**

** P000 **

**Last Name First Name M.I. Student ID Social Security #**

** **

**Address (Include Apt. No) Date of Birth**

**  **

**City, State, Zip Code Student Phone Number Parent Phone Number**

**Section B. Family Information- List the people in your parent’s household, including:**

* Yourself and your parent(s) (including stepparent) even if you don’t live in the same household
* Your parent(s) other children even if they don’t live with your parent but will still receive more than half of their support from your parent(s) from July 1, 2021 through June 30, 2022 or if they are required to provide parental information to receive Federal Student Aid
* Other people that live with your parent(s) and receive more than half of their support from your parent(s) and will continue to receive the support from July 1, 2021 through June 30, 2022

Write the names of all household members in the spaces below. Also write in the name of the college for any household member, excluding your parent(s), who will be attending at least half-time between July 1, 2021 and June 30, 2022 and will be enrolled in a degree, diploma, or certificate program. Please attach a separate page if you need additional space.

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** | **Age** | **Relationship** | **College** |
|  |  | **Self** | **Averett University** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**\*\*\*WARNING: If you purposely give false or misleading information on this worksheet,**

**you may be fined, sent to prison or both. \*\*\***

Student Name: Student ID: P000 Dependent (V1)

**Section C. Student’s/ Parent’s Tax Information- Please check one box only.**

|  |  |
| --- | --- |
| **Student Section** | **Parent Section** |
| I have used IRS Data Retrieval Tool to transfer 2019 IRS  income tax information into FAFSA. | I have used IRS Data Retrieval Tool to transfer 2019  income tax information |
| I am unable to or will not use IRS Data Retrieval Tool to  transfer 2019 IRS income tax information into FAFSA.  Please attach your 2019 IRS Tax Return Transcript. | I am unable to or will not use IRS Data Retrieval Tool to  transfer 2019 IRS income tax information into FAFSA.  Please attach your 2019 IRS Tax Return Transcript. |
| I am not required to file and will not file IRS Federal  Income taxes for 2019 (Please attach 2019 W-2s if  applicable.) | I am not required to file and will not file IRS Federal  Income taxes for 2019 (Please attach 2019 W-2s if  applicable.) |

**\*\*\* To obtain the 2019 IRS Tax Return Transcript, please visit http://www.irs.gov/Individuals/Get-Transcript or call 1-800-908-9946. \*\*\***

**Section D. Non-Tax Return Filers**

Provide documentation from the IRS or other relevant tax authority dated on or after October 1, 2020 that indicates a 2019 IRS income tax return was not filed with the IRS. Please attach all W2s and 1099s for any income earned during 2019.

Check here if confirmation of IRS non-filing letter is provided.

Check here if confirmation of IRS non-filing letter will be provided later or you will be completing the non-tax

filing statement provided by Averett University.

|  |  |  |
| --- | --- | --- |
| Employer’s Name | IRS W-2 or an Equivalent Document Provided? | Annual Amount Earned in 2019 |
| (Example: ABC’s Auto Body Shop | Yes | $4,500.00 |
|  |  | $ |
|  |  | $ |
|  |  | $ |
| Total Amount of Income Earned From Work | | $ |

**E. Certification and Signature**

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date. Each person also understands that if any of the information reported on this form is inconsistent with what has been reported on the FAFSA, additional documentation may be required.

 P000

Print Student’s Name Student ID Number

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Student’s Signature **(Ink Signature Required)** Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Signature **(Ink Signature Required)** Date

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