

Financial Assistance 8600 University Boulevard Evansville, IN 47712 Phone: 812-464-1767 or 800-467-1965 Fax: 812-461-5305 / Email: finaid@usi.edu

2023-2024 Verification Worksheet

Your FAFSA was selected for a process called verification. By law, before disbursing Federal and State Student Aid, we must compare your FAFSA with the information on this worksheet and with any other required documents. We may ask for additional information. This process may result in corrections to your FAFSA and could affect federal or state eligibility.

Read carefully and attach all required documentation. <u>Incomplete forms will not be processed!</u>

A. Student Information	
Last Name First Name	M.I. USI Student ID number (SSN if ID is unknown)
Phone Number (include area code)	Date of Birth
B. Household Members and Number in College	
Check the box that indicates your current status (according to FAFSA) AND co Dependent Student*	omplete the table below: Independent Student**
*A student is dependent if he/she was required to provide parental data on the FAFSA. For more information visit: https://studentaid.gov/apply-for-aid/fafsa/filling-out/dependency List below the people in the parents ' household. Include	**A student is independent if he/she was not required to provide parental data on the FAFSA. For more information visit: https://studentaid.gov/apply-for-aid/fafsa/filling-out/dependency List below the people in the student's household . Include:
 ✓ The student. ✓ The parents (including a stepparent) even if the student doesn't live with the parents. For more information visit: https://studentaid.gov/sites/default/files/fafsa-parent.pdf ✓ The parents' other children if the parents will provide more than half of their support from July 1, 2023, through June 30, 2024, or if they would be required to provide parental information if they were completing a FAFSA for 2023-2024. ✓ Other people ONLY if they now live with the parents and the parents provide more than half of that person's support and will continue to provide more than half of that person's support through June 30, 2024. 	 ✓ The student's spouse if the student is married. ✓ The student's or spouse's children if the student or spouse will provide more than half of their support from July 1, 2023, through June 30, 2024. ✓ Other people if they now live with the student and the student or spouse provides more than half of the other person's support and will continue to provide more than half of that person's support through June 30, 2024.

Full Name of Household Members	Age	Relationship to Student	Is the household member attending college <u>at least half-time</u> in a degree, diploma, or certificate program now or any time between July 1, 2023, and June 30, 2024?		
		Self	University of Southern Indiana		
			□ No □ Yes, name of college:		
			□ No □ Yes, name of college:		
			□ No □ Yes, name of college:		
			□ No □ Yes, name of college:		
			□ No □ Yes, name of college:		
			□ No □ Yes, name of college:		

Student Name:	ne: USI ID #:								
C. Student/Spouse	Tax Filing Status and Inco	ome Information							
You (the student) n	nust indicate whether or r	not you filed a tax retui	rn and follow th	e instructions a	accordingly.				
☐ Yes ☐ No	Did you file (and your spouse if you are married), or will you file, a 2021 Federal IRS Tax Return?								
If yes	Continue to Section D.								
If no	1. Did you, the stude	ent, work in 2021?					☐ Yes □	□ No	
	2. List below your sources of Income/Support (e.g. Employer's name, Disability Benefits, etc.) Students who received total support from parent(s) should write 'TSFP' below.					.)	Annual Total for 2021		
If you are depended	nt (according to FAFSA), you Did your parent(s) file of this form.]								
If yes	Continue to Section E.								
If no	1. Did your parent(s) work in 2021?					⊒ Yes 〔	□ No	
	2. List below your p Benefits, etc.)	parent(s)' sources of Inc	come/Support (e.g. Employer's	name, Disability		Annual 1 for 20		
L						I			
E. Certification and	l Signature(s)								
Typed/Electronic si	gnatures are NOT accepte	e <mark>d</mark>							
	pelow certifies that all of the ntenced to jail, or both.	e information reported is	s complete and c	orrect. Warning:	If you purposely	give false or n	nisleading	information,	
Student Signature (Required)	Date		rent Signature *equired if the st		dent accordin	Date g to FAFS	A)	