

### 2024-25 Verification Worksheet - V5

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Before your financial aid for the 2024-25 award year can be finalized, federal regulations require that certain data from your Free Application for Federal Student Aid (FAFSA) be verified for accuracy. Complete all sections of this worksheet and submit it to the AC Financial Aid Office. DO NOT leave any section blank.

| Last Name: | First Name: | ID:       |                      |
|------------|-------------|-----------|----------------------|
| Address:   | Phone:      | AC Email: | @amarillocollege.com |
| City:      | State:      | Zip Code: | Date of Birth:       |

VERY IMPORTANT! For FAFSA Verification purposes, you're classified as Dependent if you were required to provide parental data on your FAFSA. You're classified as Independent if you were not required to provide parental data.

Dependent Students: List below the people in your parent's family. Include:

- Yourself.
- Your parent(s), even if you are not living with them. 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 siblings if the following are true: Your sibling lives with your parents (or lives apart because of college enrollment), or they receive more than half of their support from your parents, and they will continue to receive more than half of their support from your parents during the award year.
- Other persons if the following are true: They live with your parents, or they receive more than half of their support from your parents, and they will continue to receive more than half their support from your parents during the award year.

Independent Students: List below the people in your family. Include:

- Yourself (and your spouse, if you're currently married).
- Your children if the following are true: They live with the student (or live apart because of college enrollment); or they receive more than half of their support from the student; and they will continue to receive more than half their support from the student during the award year. \*Note: Do not count unborn children.
- Other people if the following are true: They live with the student; or they receive more than half of their support from the student; and they will continue to receive more than half their support from the student during the award year.

| Full Name | Birthdate | Relationship to you |
|-----------|-----------|---------------------|
|           |           | Self                |
|           |           |                     |
|           |           |                     |
|           |           |                     |
|           |           |                     |
|           |           |                     |

Your Income: 2022 Calendar Year Income Information (January 1, 2022 through December 31, 2022)

| Check c    | only one of the boxes below and                              | submit the following:   |  |
|------------|--|---|--|
| [          | ] I filed or will file a 2022 Federal Income Tax Return      | FTI transferred via FA-DDX on FAFSA, all pages of the 2022 IRS                        |  |
|            |  | Tax Return Transcript (see instructions below), or signed 1040.                       |  |
| [          | ] I worked but am not required to file a 2022 Federal Income | 2022 W-2 Forms or other earnings statement. Verification of                           |  |
| Tax Return |  | non-filing from IRS via direct data exchange or signed statement if unable to obtain. |  |
| [          | ] I did not work and will not file a 2022 Federal Income Tax | Verification of non-filing from IRS via direct data exchange or                       |  |
| Return     |  | signed statement if unable to obtain.   |  |

| Check only one of the boxes below:                                  | Submit the following:  |
|---|--|
| [ ] I (we) filed or will file a 2022 Federal Income Tax Return(s)   | FTI transferred via FA-DDX on FAFSA, all pages of the 2022 IRS   |
|   | Tax Return Transcript (see instructions below), or signed 1040.  |
| [ ] I (we) worked but am not required to file a 2022 Federal Income | 2022 W-2 Forms or other earnings statement. Verification of      |
| Tax Return(s) 2   | non-filing from IRS via direct data exchange or signed statement |
| [ ] I (we) did not work and will not file a 2022 Federal Income Tax | Verification of non-filing from IRS via direct data exchange or  |

ID Number: \_\_\_\_\_

signed statement if unable to obtain.

You can submit a signed copy of your 1040 form, an IRS Tax Return Transcript may be obtained free-of-charge at www.irs.gov/Individuals/Get-Transcript or by calling 1-800-908-9946, or rather than obtaining a Tax Return Transcript, you may instead resubmit your 2024-2025 FAFSA data <a href="https://studentaid.gov/h/apply-for-aid/fafsa">https://studentaid.gov/h/apply-for-aid/fafsa</a>, be sure to give consent to allow the Future Act Direct Data Exchange (FA-DDX) to directly import IRS data into the Free Application for Federal Student Aid.

Verification of 2022 Student Income if Student did not file a tax return:

Parental Income (if you're Dependent) or Spouse's Income (if you're married)

Student Name: \_\_\_

Return

| Employer's Name                         | IRS W-2  | Annual Amount Earned |
|---|----------|----------------------|
|   | Provided | in 2022              |
| (Example) ABC's Auto Body Shop          | Yes      | \$4,500.00           |
|   |          |                      |
|   |          |                      |
|   |          |                      |
| Total Amount of Income Earned From Work |          | \$                   |

Verification of 2022 Parent/Spouse income if taxes were not filed:

| Employer's Name                         | IRS W-2  | Annual Amount Earned |
|---|----------|----------------------|
|   | Provided | in 2022              |
| (Example) ABC's Auto Body Shop          | Yes      | \$4,500.00           |
|   |          |                      |
|   |          |                      |
|   |          |                      |
| Total Amount of Income Earned From Work | •        | Ś                    |

### Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person at Amarillo College to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

| (Print Student Name)   |   |
|--|---|
|  |   |
| oose and that the Federal student financial<br>ay the cost of attending Amarillo College fo  | assistance I may receive will only be used for educational purposes an 2024-25.   |
| (Student's Signature)  | (Date)  |
|  |   |
| (Student's ID Number)  |   |
| (AC Employee Signature)  | (Date)  |
|  | entidad y Declaración de Propósito Educativo<br>a ser firmadas en la institución)   |
| El estudiante debe comparecer en persona obresentación de una identificación con fotogina licencia de conducir, otro tipo de identificación conservará una copia de la identificación co ecibió y revisó, y el nombre del funcionario estudiantes. | en Amarillo College para verificar su identidad mediante la<br>grafía (ID) válida emitida por el gobierno que no haya expirado, como<br>ficación emitida por el estado o pasaporte, entre otros. La institución<br>n fotografía del estudiante en la cual se anotará la fecha en la que se<br>de la institución autorizado a recibir y revisar las identificaciones de la |
| Además, el estudiante debe firmar, en prese<br>Educativo proporcionada a continuación.   | encia del funcionario de la institución, la Declaración de Propósito  |
| Dec  | claracion de Proposito Educativo  |
| Certifico que yo,<br>(Imprimir Nombre del Es   | , soy el individuo que firma esta Declaracion de Proposito<br>tudiante)   |
| , .  | estudiantil que yo pueda recibir solo será utilizada para fines   |
| (Firma del Estudiante)   | (La Fecha)  |
|  |   |

# **Identity and Statement of Educational Purpose** (To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at Amarillo 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 stateissued ID, or passport; 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                    |                         | <u>a</u> a                                       | m the individual :    | signing this statement of  |
|-------------------------------------|-------------------------|--|-----------------------|----------------------------|
| (Print Stu                          | dent's Name)            |  |                       |                            |
| Educational Purpose and             |                         |  | •                     | -                          |
| for educational purposes            | and to pay the o        | cost of attending A                              | marillo College fo    | or 2024-25.                |
|                                     |                         |  |                       |                            |
|                                     |                         |  |                       |                            |
| (Student's Signature)               |                         | (Date)   |                       |                            |
|                                     |                         |  |                       |                            |
| (Student's ID Number                | ^)                      |  |                       |                            |
| N                                   | lotary's Certificate of | Acknowledgement                                  |                       |                            |
|                                     |                         |  |                       |                            |
| State of                            | , City/County of        |  |                       |                            |
| On, before me,                      |                         |  |                       | personally appeared.       |
| (Date)                              | (Notary's name          |  |                       |                            |
|                                     |                         |  |                       |                            |
|                                     | , and pro               | ovided to me on basis o                          | of satisfactory evide | nce of                     |
| (Printed name of signer)            |                         |  |                       |                            |
|                                     |                         |  |                       |                            |
|                                     |                         | to be the above-nar                              | ned person who signed | d the forgoing instrument. |
| (Type of government-issued photo ID | provided)               |  |                       |                            |
|                                     |                         |  |                       |                            |
| WITNESS my hand and official seal   |                         |  |                       |                            |
| •                                   | Notary signature)       |  |                       |                            |
| (333)                               |                         |  |                       |                            |
|                                     |                         |  |                       |                            |
|                                     | My commission ex        | cpires on  |                       |                            |
|                                     |                         | (Date)   |                       |                            |
|                                     |                         |  |                       |                            |
|                                     |                         |  |                       |                            |
|                                     | _ ·                     | PIES OF ANY REQUIRED D                           | -                     |                            |
| Amazilla Callaga Financial A        |                         | FINANCIAL AID OFFICE A<br>147 ● Amarillo, TX 791 |                       |                            |

## MUST INCLUDE COPY OF PHOTO ID WITH FORM

que

|     | Student Name:  |   | V4   |
|-----|--|---|--|
|     | Ve   | rificacion de Identidad y Declaracion d<br>(Para ser firmadas en la pres          |  |
|     | el estudiante no es capaz de comparec<br>stitución:                                | er en persona en Amarillo College para v  | verificar su identidad, el mismo debe proporcionar a la  |
| (a) |  |   | ierno que no expirado, que se reconoce en la declaración del notar<br>a de conducir, otro tipo de identificación emitida por el estado o |
| (b) |  |   | debe ser notariada. Si la declaración del notario aparece<br>dicar de manera clara que la Declaracion de Proposito Educativo er          |
|     |  | Declaracion de Proposito  | Educativo  |
| (   |  | re del Estudiante)  | o que firma esta Declaracion de  |
|     | Proposito Educativo y que la ayuda fina<br>educativos y para pagar el costo de asi | inciera federal estudiantil que yo pueda<br>stir a Amarillo College para 2024-25. | recibir, solo será utilizado para fines  |
|     | (Firma del Es  | udiante)  | (la Fecha)   |
|     | (Número de lo  | dentificacion del Estudiante)   |  |
|     |  | Notary's Certificate of Acknowledge   | ment   |
|     | State of   | , City/County of  |  |
|     | On, before m   | e,  |  |
|     | (Date)   | (Notary's name)   |  |
|     | personally appeared,   |   | , and provided to me   |
|     |  | (Printed name of signer)  |  |
|     | on hasis of satisfactory evidence  | of identification   |  |
|     | on 2000 or outsidetor, criticise   | (Type of government-issu  |  |
|     | to be the above-named person w   | ho signed the foregoing instrument.   |  |
|     |  |   |  |
|     | WITNESS my hand and official se<br>(seal)  | al(Notary signature   |  |
|     |  | My commission expires on  |  |
|     |  | (Date)  | OF PHOTO ID WITH FORM  |
|     |  | ORM (ALONG WITH COPIES OF ANY I   | REQUIRED DOCUMENTS) SHOULD BE TURNED IN  |

Aid Office ● PO Box 447 ● Amarillo, TX 79178 ● (806) 371-5000 ● FAX (806) 371-5371

| Student Name:   | ID Number:                                     | V4             |
|---|--|----------------|
|   |  |                |
| Signature   | S  |                |
| (we) certify that the information provided on this FAF inderstand that <b>intentionally</b> providing false, inaccura | ·  | • •            |
| muerstand that <b>intentionally</b> providing false, maccura  | e or misleading information can result in fede | erai penaities |
|   | - Data   |                |
| Student (Electronic Signature Not Acceptable)   | Date   |                |
| Spouse (only if spouse paid child support)  | Date   |                |
| Parent (only if student is classified as Dependent)   | Date   |                |
|   |  |                |
|   |  |                |

#### MUST INCLUDE COPY OF PHOTO ID WITH FORM

THIS FORM CANNOT BE FAXED OR EMAILED – Federal regulations require the original document.