

2500 S. Main, Hope, AR 71802 | (870) 722-8264 | Fax: (870) 722-8145 | www.uaht.edu

## 2022-2023 Verification Worksheet Independent Student

## INSTRUCTIONS:

Your FAFSA was selected by the U.S. Department of Education for a review process called "Verification." Verification must be completed before your financial aid can be finalized and before any federal aid may be credited to your student account. If there are differences between your FAFSA and this information, we will update your FAFSA, recalculate your aid eligibility and send a revised financial aid package.

- <u>Sign on the bottom of the second page</u> and return the complete form, along with all requested documentation, to the Financial Aid Office.
- Verification cannot be completed until all requested documents are received and reviewed.
- If tax information must be verified, a signed copy of your tax return is acceptable to complete this process. Also, you must either correct your FAFSA by using the IRS Data Retrieval Tool or submit a copy of your IRS Tax Return Transcript.

Student Name:	SSN:
Permanent Address:	
City:	State: Zip Code:
Phone/Cell:	Email:
A. HOUSEHOLD INFORMATION:	

Write the names, ages, and relationship to student of all household members. For any household members who will be attending college at least half-time between July 1, 2022, and June 30, 2023, and will be enrolled in a degree or certificate program, write the name of the college he/she is attending. When listing the persons in your household, include:

- ✓ yourself (1<sup>st</sup> row in box below)
- ✓ your spouse, if married
- ✓ any other dependent children and/or other people in the home, if you provide more than half of their support and will provide more than half of their support from July 1, 2022, through June 30, 2023.

Full Name of All Household Members	Age	Relationship to Student (spouse, son, daughter, sibling, etc.)	College (attending at least ½ time in 2022-23)
		Student-Self	University of Arkansas Community College at Hope- Texarkana



## **FINANCIAL AID OFFICE**

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STUDENT'S NAME

UAHT ID#

## B. STUDENT (& SPOUSE) TAX/INCOME INFORMATION: If the IRS data retrieval tool was used, skip this section.

Did you (& your spouse, if married) file a Federal Income Tax Return for 2020?

\_\_\_\_Yes \_\_\_\_No

- 1. If you answered YES, update your FAFSA by using the IRS data retrieval tool or attach a copy of your 2020 Federal tax return transcript from the IRS.
  - To use the IRS data retrieval tool, log into your FAFSA online at: https://studentaid.ed.gov/sa/fafsa.
  - Request a free copy of your 2020 Federal tax return transcript on the IRS website at <u>www.irs.gov</u>; click on "Get My Tax Record" enter information as requested; select Type -Return Transcript and 2020 year or call 1-800-908-9946.
  - I give University of Arkansas Community College at Hope-Texarkana permission to request my tax return transcript.
- 2. If you answered NO:
  - The student and spouse were not employed and had no income earned from work in 2020.
  - Attach a photocopy of your (& your spouse's) 2020 W-2s and unemployment documents (if applicable) and identify your untaxed earnings in the table below.

Employer's Name	Did you receive a W-2	Annual Amount Earned in 2020
(example) ABC's Babysitting Service	No	2300

I hereby certify that all statements and information provided on this form are true, complete, and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to give proof of the information that I have given on this form. I understand it is a federal crime to purposefully give false or misleading information on this form and that any person doing so may be subject to a fine, imprisonment, or both. (Signature must be provided by the student. Spouse signature is optional.)

Student Signature: \_\_\_\_\_

\_Date: \_\_\_\_\_

Spouse's Signature (optional):