



## 2022-2023 Student Verification Worksheet

For office use only: <input type="checkbox"/> DEPENDENT STUDENT <input type="checkbox"/> INDEPENDENT STUDENT	Tracking Group Code: _____ Date: _____ Rev.1 Code: _____ Date: _____ Rev. 2 Code: _____ Date: _____
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Student: \_\_\_\_\_ / \_\_\_\_\_

Last Name	First Name	M.I.	Telephone Number	/	Cell Number
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Your application for federal student aid will be reviewed in a process called **verification**. In this process, we will be comparing the information from your FAFSA with your federal tax information, W-2 forms, and/or other required documents. If there are differences between your application information and verification documents submitted, corrections will be made to your application and your information will be reprocessed. You must complete and sign this worksheet and submit it along with any other required documents before we can continue processing your financial aid application. Contact Office of Financial Aid at 680-488-2470, ext. 273 for more information.

**A. FAMILY INFORMATION**

- Dependent Students:** List the names of the people in your parents' household in the chart below. Include the following:
- Yourself and your parent(s) you live with (including stepparent), and
  - Your parents' other children, if (a) your parents will provide more than half of their support from July 1, 2022 through June 30, 2023, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
  - Other people 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, 2022 through June 30, 2023.

- Independent Students:** List the names of the people in your household in the chart below. Include the following:
- Yourself and your spouse, if married,
  - Your children, if you will provide more than half of their support from July 1, 2022 through June 30, 2023, and
  - Other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2022 through June 30, 2023.

In the chart below, write the names, age, etc. of all family members as defined above. Also write in the name of the college for any family member, excluding your parent(s), who will be attending college at least half time between July 1, 2022 and June 30, 2023, and will be enrolled in a degree, diploma, or certificate program. *(Note: If you need more space, attach a separate page).*

Full Name <small>(Legal name as it appears on your birth certificate or passport)</small>	Age	Relationship to you	Currently employed <small>(Yes or No)</small>	College <small>(Currently attending)</small>
Susan Smith (example)	18	Sister	No	Palau Community College
		Self		Palau Community College

Return a copy of this completed worksheet to PCC Office of Financial Aid or via email to [ingirairiki@palau.edu](mailto:ingirairiki@palau.edu) or via fax to: 680-488-4468.

**B. STUDENT'S INCOME INFORMATION TO BE VERIFIED** – Check the box below that applies.

**B1. IRS TAX FILERS** - Complete this section if you filed a U.S. IRS Tax Return.

I, the student (and if married, my spouse) have submitted/will submit a copy of my/our 2020 U.S. Tax Return Transcript from the IRS.

**B2. NON-IRS TAX FILERS** - Complete this section if you filed a non-U.S. or foreign tax return **OR** received a Wage & Tax Statement from one of the Freely Associated States (Federated States of Micronesia, Republic of Palau, and the Republic of the Marshall Islands).

I, the student (and, if married, my spouse):

have submitted/will submit a copy of my/our 2020 transcript that was obtained at no cost from the relevant taxing authority of a U.S. Territory (Guam, American Samoa, the U.S. Virgin Islands) or Commonwealth (Puerto Rico and the Northern Mariana Islands) **OR** a copy of my/our foreign country tax return, or a copy my/our signed tax document with proof of fees charged for an official transcript.

have submitted/will submit a copy of my/our 2020 Wage & Tax Statement from one of the Freely Associated States (Federated States of Micronesia, Republic of Palau, and the Republic of the Marshall Islands).

**B3. TAX NON- FILERS**- Complete this section if you did not file, and were not required to file a tax return with your appropriate taxing authority. I, the student and if married, my spouse, could not provide the Verification of Non-Tax Filing Letter dated on or after October 1, 2020 because the appropriate taxing authority in the Freely Associated States does not provide such documentation.

I, the student (and, if married, my spouse):

was not employed and earned no income from work in 2020.

was/were employed in 2020 and have listed below the names of all the employers and the amount earned from each employer in 2020. I/we have attached copies of all 2020 W-2 forms issued to me/us by my/our employers.

Income Source(s)	2020 Income Amount	Supporting Statement Attached
1. Student -		___ Yes ___ No, will submit later
2. Spouse -		___ Yes ___ No, will submit later

List below any untaxed income you received in 2020 such as pension benefits, market, etc. Enter "0" if you received no income in 2020.

Income Source(s)	2020 Income Amount	Supporting Document Attached
1. Student - Pension benefits (example)	\$1,000.00 (example)	Yes (example)
		___ Yes ___ No, will submit later

**C. PARENT INCOME INFORMATION TO BE VERIFIED** – Check the appropriate box that applies.

**C1. IRS TAX FILERS** - Complete this section if you, the parent(s), filed a U.S. IRS tax return

I/we, the parent(s) have submitted/will submit a copy of my/our 2020 U.S. Tax Return Transcript obtained from the IRS.

**C2. NON-IRS TAX FILERS** - Complete this section if you, the parent(s) filed a non-U.S. or foreign tax return **OR** received a 2020 Wage & Tax Statement from one of the Freely Associated States (Federated States of Micronesia, Republic of Palau, and Republic of the Marshall Islands).

I/we, the parent (s):

have submitted/will submit a copy of my/our 2020 transcript that was obtained at no cost from the relevant taxing authority of a U.S. Territory (Guam, American Samoa, the U.S. Virgin Islands) or Commonwealth (Puerto Rico and the Northern Mariana Islands) **OR** a copy my/our 2020 foreign country tax return(s).

have submitted/will submit a copy of my/our 2020 wage & tax statement from one of the Freely Associated States (Federated States of Micronesia, Republic of Palau, and Republic of the Marshall Islands).

**C3. TAX NON- FILERS** - Complete this section if you, the parent(s) did not file and were not required to file a tax return with your appropriate taxing authority. . I/we, the parent(s) could not provide the Verification of Non-Tax Filing Letter dated on or after October 1, 2020 because the appropriate taxing authority in the Freely Associates States does not provide such documentation.

I/we, the parent (s):

was/were not employed and earned no income from work in 2020.

was/were employed in 2020 and have listed below the names of all the employers and the amount earned from each employer in 2020. I/we have attached copies of all 2020 W-2 forms issued to me/us by my/our employers.

Income Source(s)	2020 Income Amount	Supporting Statement Attached
1. Father -		___ Yes ___ No, will submit later
2. Mother -		___ Yes ___ No, will submit later

List below any untaxed income you received in 2020 such as pension benefits, market, etc. Enter "0" if you received no income in 2020

Income Source(s)	2020 Income Amount	Supporting Document Attached
1. Student - Pension benefits (example)	\$1,000.00 (example)	Yes (example)
		___ Yes ___ No, will submit later

**D. CERTIFICATION AND SIGNATURES**

**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

Each person signing this worksheet certifies that all of the information reported on this form is complete and correct.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature (required only for dependent student)

\_\_\_\_\_  
Date