

Office of Financial Aid

P.O. Box 9 Koror, Palau 96940 Telephone: 680-488-2470/2471; Website address: www.pcc.palau.edu

2024-2025 Student Verification Worksheet

| For office | e use only: _ | DEPENDENT STUDENT INDEPEN | DENT STUDENT | Tracking Gror Rev.1 Code: Rev. 2 Code: | | Date: | | |
|---|---|---|--|--|------------------------|---------------------------|--|--|
| Student: _ | | | | | | / | | |
| | Last Name | First Name | M.I. | | Telephone Number | / Cell Number | | |
| Your application for federal student aid will be reviewed in a process called <i>verification</i> . 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. | | | | | | | | |
| | LY INFORM | MATION ts: List the names of the people in your p | grents' household | l in the chart held | w. Include the follow | vina: | | |
| YourseYour p childreOther p | elf and your pa parents' other on yould be recopeople if they | urent(s) you live with (including stepparent children, if (a) your parents will provide m quired to provide parental information who now live with your parents, and your parent from July 1, 2024 through June 30, 2025. | t), and nore than half of the en applying for Fe | neir support from | a July 1, 2024 through | June 30, 2025, or (b) the | | |
| Indep | pendent Stude | ents: List the names of the people in your | household in the | chart below. In | clude the following: | | | |
| | | ouse, if married, | ort from July 1 2 | 024 through June | 20, 2025, and | | | |

- Your children, if you will provide more than half of their support from July 1, 2024 through June 30, 2025, 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, 2024 through June 30, 2025.

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, 2024 and June 30, 2025, and will be enrolled in a degree, diploma, or certificate program. (Note: If you need more space, attach a separate page).

| Full Name (Legal name as it appears on your birth certificate or passport) | Age | Relationship to you | Currently employed (Yes or No) | College (Currently attending) |
|--|-----|------------------------|-----------------------------------|----------------------------------|
| 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 ingirairikl@palau.edu or via fax to: 680-488-4468.

| В. | STUDENT'S INCOME INFORMATION TO BE VERIFIED – Ch | eck the box below that a | 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 2022 U.S. <u>Tax Return Transcript</u> 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 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 2022 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 comy/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 2022 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. <u>TAX NON- FILERS</u> - 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, 2022 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 2022. was/were employed in 2022 and have listed below the names of all the have attached copies of all 2022 W-2 forms issued to me/us by my/our | | t earned from each employer in 2022. I/we | | | | | | |
| | Income Source(s) 1. Student - | 2022 Income Amount | Supporting Statement AttachedYes No, will submit later | | | | | | |
| | 2. Spouse - | | Yes No, will submit later | | | | | | |
| | | | | | | | | | |
| | List below any untaxed income you received in 2019 such as pension benefit Income Source(s) | 2022 Income Amount | Supporting Document Attached | | | | | | |
| | 1. Student - Pension benefits (example) | \$1,000.00 (example) | Yes (example) | | | | | | |
| | | | Yes No, will submit later | | | | | | |
| | I/we, the parent (s): have submitted/will submit a copy of my/our 2022 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 2022 foreign country tax return(s). have submitted/will submit a copy of my/our 2022 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, 2022 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 2022. | | | | | | | | |
| | was/were employed in 2022 and have listed below the names of all the employers and the amount earned from each employer in 2022. I/w have attached copies of all 2022 W-2 forms issued to me/us by my/our employers. | | | | | | | | |
| | Income Source(s) | 2022 Income Amount | Supporting Statement Attached Yes No, will submit later | | | | | | |
| | 1. Father - | | Yes No, will submit later | | | | | | |
| | 2. Notice | | | | | | | | |
| | List below any untaxed income you received in 2019 such as pension benefits, market, etc. Enter "0" if you received no income in 2022 Income Source(s) 2022 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 Each person signing this worksheet certifies that all of the information reported | | worksheet, you may be fined, be sentenced to jail, or both. e and correct. | | | | | | |
| | Student's Signature Date Parent's | Signature (required only for | dependent student) Date | | | | | | |
| | Facility Date Facility | Digitature (required only 101 | dependent student) Date | | | | | | |