



## **2026-2027 Verification Worksheet (Independent Student)**

**Student's Name:**

**AQ ID:**

Your 2026-2027 Free Application for Federal Student Aid (FAFSA) was selected by the U.S. Department of Education for review in a process called verification. The Office of Financial Aid will compare your FAFSA with the information reported on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. If you have any questions regarding this verification, contact the Office of Financial Aid as soon as possible so that your financial aid is not delayed. **It is recommended that you keep a copy of this form for your records.**

List below the people to be included in your family size. Family size includes the following:

- The student
- The student's spouse (if applicable)
- The student's dependent children, if all of the following are true:
  - The student's dependent children live with the student (or live apart because of college enrollment);
  - The student's dependent children receive more than half of their support from the student; and
  - The student's dependent children will continue to receive more than half of their support from the student during the award year
- Other persons, if the following are true:
  - They live with the student;
  - 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.

**If more space is needed, attach a separate page with the student's name and ID.**

<b>Full Name of All Family Members</b> Include self, spouse (if applicable), and others who receive at least 50% of their support from you	<b>Age</b>	<b>Relationship to student</b>
		<b>Self (Student)</b>
<b>Total number of persons in household (including self)</b>		

**Please return the completed and signed form to the Financial Aid Office by mail or in person. Our contact information is listed at the top of this form. Return this form as soon as possible so that your financial aid will not be delayed.**

**Aquinas College Financial Aid Office, Hruby Hall**

1700 Fulton St. E, Grand Rapids, MI 49506

Ph: 616.632.2893 • Fx: 616.732.4547 • financialaid@aquinas.edu

**Student Income Information to be Verified:** Select one of the options below.

- The student (and/or spouse, if applicable) used the Future Act Direct Data Exchange (FA DDX) in the FAFSA on the web.
- The student (and/or spouse, if applicable) did not use the FA DDX in the FAFSA on the web. Attached is a **signed** copy of the student's 2024 Federal income tax return with applicable schedules, or a copy of the student's 2024 Federal income tax return transcript from the IRS.
- The student (and/or spouse, if applicable) was not employed and had no income earned from work in 2024.
- The student (and/or spouse) was employed in 2024, did not file a tax return, and has listed below the names of all employers, sources of income, whether an IRS W-2 form or equivalent was provided, and the amount. Provide copies of all 2024 IRS W-2 forms issued to you (and spouse, if applicable). List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, provide a separate page with your name and student ID.

Source of Income	Amount Earned	W-2 Attached?	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Certification and Signature(s)**

I certify that all of the verification documents submitted and information on this worksheet are complete and correct.

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Student's Handwritten Signature (required)

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Date**WARNING:** If you purposely give false or misleading information, you may be fined, sent to prison, or both.

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