

Verification Worksheet 2022–2023

Please upload all documents using the Document Upload through your MySSU account. You may also mail your information to: Shawnee State University, Financial Aid Office, 940 Second Street, Portsmouth Ohio, 45662 or fax to 740-351-3435. Please do not email any documents.

Stı	Student Information						
Nan	ne		Student ID				
Add	ress (include Apt. Number)	Date of Birth					
City	State	Zip	Phone Number (include area code)				
Fa	mily Information (check one)						
	Independent Students: List the people in your household, include: (A) yourself and your spouse if you are married; (B) your children, if you will provide more than half of their support from July 1, 2022 through June 30, 2023; (C) 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.						
	Dependent Students: List the people in your parents' household, include: (A) yourself and your parent(s) (including stepparent) even if you don't live with your parents; (B) your parents' other children, even if they don't live with your parent(s), if your parents will provide more than half of their support from July 1, 2022 through June 30, 2023 or the children would be required to provide parental information when applying for Federal Student Aid; (C) 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.						

List the names and ages of all household members in the space below:

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

Full Name	Age	Relationship	*College	*Will be Enrolled at Least Half Time
Marty Jones (example)	28	Wife	Central University	Yes
		SELF		

^{*} If any household members 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, include the name of the college.

Student Name:						
Student ID:						
Please visit the Financial Aid website's FAFSA verification link if the stu amended IRS income tax return, or were victims of IRS identity theft.						
Student and Spouse (if married) Tax and Income Inf	ormation					
Check the box that applies (check only one):						
Tax Filers: The student and spouse (if married) has filed taxes and will provide a 2020 tax return transcript or complete the IRS Data Retrieval tool in FASFA on the web.						
Non-tax Filers:						
☐ The student and/or spouse was not employed and had Please request and submit a verification of Non-Filing lets		2020. Independent students:				
The student and/or spouse was employed in 2020 and has listed below the names of all the student's employers, the amount earned from each employer in 2020, and whether an IRS W-2 form is attached. List every employer even if they did not issue an IRS W-2 form. If more space is needed, attach a separate page with the student's name and student ID at the top.						
Employer's Name	2020 Amount Earned	IRS W-2 Attached?				
Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Yes (example)				
Parent Tax and Income Information Note: If two parents were reported in Section B of this worksheet, the i Check the box that applies (check only one): Tax Filers: □ The parent(s) has filed taxes and will provide a 2020 tax FASFA on the web. Non-tax Filers: □ The parent(s) was not employed and had no income earequest and submit a verification of Non-Filing letter from □ The parent(s) was employed in 2020 and has listed beld from each employer in 2020, and whether an IRS W-2 to the parent(s) by employers. List every employer even if of non-filing from the IRS. If more space is needed, attach	rned from work in 2020. <i>Parents in the IRS.</i> The names of all the parent's erform is attached. Attach copies of they did not issue an IRS W-2 form	ne IRS Data Retrieval Tool in included on FASFA will need to mployers, the amount earned of all 2020 IRS W-2 forms issued m. Also, please provide a statement				
Employer's Name	2020 Amount Earned	IRS W-2 Attached?				
Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Yes (example)				
Sign this Worksheet Each person signing this worksheet certifies that all of the information rep sign and date. WARNING: If you purposely give false or misleading information in the contraction of the c						
Student Date	Parent	Date				