

2024-2025 Independent Verification Worksheet

Your 2024–2025 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

A. Independent Student's Information			
Student's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number
Student's Street Addres	s (include apt. no.)	Student's Date of Birth	
City	State	Zip Code	Student's Email Address
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number

B. Independent Student's Family Information

List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2024, through June 30, 2025, or if the child would be required to provide your information if they were completing a FAFSA for 2024–2025. Include children who meet either of these standards, even if they do not live with you.
- 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 through June 30, 2025.

Include the name of the college for any household member who will be enrolled at least half time, in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2024, and June 30, 2025. If more space is needed, attach a separate page with your name and SSN at the top.

Full Name	Age	Relationship	College	Will be enrolled at least half- time
Marty Jones(example)	28	Self	Central University	Yes

Stude	nt's Name:	SSN:		
C. Dependent Student's Income Information to Be Verified				
Che	eck the box that applies:			
	You are attaching a copy of your signed 2022 tax return, along with any schedules, and W-2's.			
	The student was not employed and had no income earned from work in 2022.			
	The student was employed in 2022 and has listed below the names of all the student's employers, the amount earned from each employer in 2022, and isn't going to file a tax return. Attach copies of all 2022 W-2 forms issued to the student by employers. List every employer even if they did not issue a W-2 form.			
	Employer's Name	2022 Amount Earned	IRS W-2 Attached?	
	Employer's Name Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Yes (example)	
D.C.				
-	ouse's Income Information to be Verified - If the student is meck the box that applies:	arried		
	You are attaching a copy of your spouse's W-2's (and signed 2022 to	ax return, if your spouse filed s	eperately).	
	Your spouse was not employed and had no income earned from wo	Your spouse was not employed and had no income earned from work in 2022.		
	Your spouse was employed in 2022 and has listed below the names of all the spouse's employers, the amount earned from each employer in 2022, and isn't going to file a tax return. Attach copies of all 2022 W-2 forms issued to the spouse by employer(s). 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 Social Security Number at the top.			
	Employar's Nama	2022 Amount Formed	IRS W-2 Attached?	
	Employer's Name	2022 Amount Earned		
	Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Yes (example)	



Verification Additional Information Worksheet

Student Name:	
Student SSN/ID#:	

	2022 Additional Financial Information	
Student		Spouse
\$	a. Education credits from IRS Form 1040 schedule 3 – line 3 .	\$
\$	b. Grant and scholarship aid reported to the IRS in the adjusted gross income. Includes Ameri- Corps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships.	\$
\$	Sum Total of a through b	\$

	2022 Untaxed Income	
Student		Spouse
\$	a. IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040 schedule 1 lines 16+20.	\$
\$	b. Child support received for all children. Don't include foster care or adoption payments.	\$
\$	c. Tax exempt interest income from IRS Form 1040—line 2a.	\$
\$	d. Untaxed portions of IRA distributions IRS Form 1040—lines (4a) minus (4b). Exclude roll-overs. If negative, enter a zero here.	\$
\$	e. Untaxed portions of pensions IRS form 1040-lines (5a) minus (5b). Exclude rollovers. If negative, enter a zero here.	\$
\$	f. Foreign Income exclusion IRS form 1040 Schedule 1 line 8d	\$
\$	Sum Total of a through f	\$

By signing this worksheet, we certify that all the information reported is complete and correct. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Please put a number or a zero in each box above.

Student's Name:	SSN:
E. Certification and Signature	
I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married, the spouse's signature is optional.	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.
Student's Signature	Date
Spouse's Signature	 Date

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the financial aid administrator at your school.

You should make a copy of this worksheet for your records.

Grace College
Office of Student Financial Aid
1 Lancer Way
Winona Lake, IN 46590

Phone: 574-372-5100 ext: 6162 \mid E-mail: financialaid@grace.edu