

SECTION A: STUDEN INFORMATION

SECTION B: FAMILY INFORMATION

List the people in your household. Include:

Student Name: Last

Office of Student Financial Planning, K-Dub Hub, Pioneer Hall 285, 100 E. Claflin, Salina, KS 67401

Student Cell Phone number

Date

KWU Student ID # or Social Security Number

2022-23 Institutional VerificationWorksheet - V1 Independent(Contact: V1_GR_I)

IMPORTANT: Your FAFSA was selected by the U.S. Department of Education for a process called verification. The verification process will be conducted by Kansas Wesleyan University in accordance with U.S. Department of Education's rules 34 CFR, Part 668.

We must collect this information before awarding Federal Financial Aid. No further processing will be done until all documentation is provided.

Middle Initial

First

Student Email address

 Your children, if you will provide Other people if they currently live more than half of their support fr 	Your children, if you will provide more than half of their support from July 1, 2022 through June 30, 2023, and							
Full Name	Age	Relationship to Student	College attending in 2022-23					
		Self	Kansas Wesleyan University					
			_					
Office Use Only:	#	#	f Initial					

Version: 09/30/21



Office of Student Financial Planning, K-Dub Hub, Pioneer Hall 285, 100 E. Claflin, Salina, KS 67401

Telephone: (785) 833-4315 **FAX**: (785) 404-1485

Student Name: Last	First	Middle Initial	KWU Student ID # or Social Security Number	Date
SECTION C: INCOM	IE INFORM	IATION		
ax returns are Fede	ral 2020 IRS	S Form 1040, Puerto R	lican Tax Return, or a foreign income tax return.	
nitial to the left for t	he circums	tance that is true for y	ou regarding your tax filing status for 2020. If you,	OR your spouse will not file
axes for 2020, pleas	e be sure to	o include each employ	er and amounts earned from work the box below	and attach copies of W-2 form
or all 2020 employe	rs.			·

Re: Student	's (and Spouse'	s) 2020	Tax and Inc	come Informat	ion
FAFSA.	e IRS Data Retrieval Tool w				
therefore, I a (1040) and as spouse or sig	to use the IRS Data Retrieva ttached a copy of my/our 2 ssociated schedules. I unde inificant other if he/she is I are currently married or liv	020 IRS Tax F rstand that I isted in Section	Return Transcript OR <i>must also provide a</i> on B of this form, ev	a <u>signed</u> copy of my/our 2 signed copy of a 2020 Tax	2020 Tax Return • Return for my
I/We did not	and will not file a 2020 U.S	S. Income Tax	Return because (ini	tial one option):	
	I/We had zero earned OR I/We had too little taxable income to be required				
	or taxable income in		to file a tax return. <i>Please complete the table</i>		
	2020		below and attac student.	h a copy of all 2020 W	-2 forms
Employ	yer			Amount earned in 2020	W-2 Attached (Y/N)
				\$	
				\$	
				\$	
	JRES (We need your 2020 ta urposely give false or misle subject to a Feder	ading informa		eligibility for federal stude	nt aid, you may be
By signing this wor complete and corr	ksheet, I (we) certify tha	t all the info	ormation reported	to qualify for federal st	udent aid is
 Student Signature		 Date	Spouse Sign	ature (Optional)	 Date

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