

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

${\bf 2022\text{-}23\ Institutional\ Verification} Worksheet-V5\ Independent\ {\bf (Contact:}$

V5_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. If you, OR your spouse will not file taxes for 2020, please be sure to include amounts earned from work in Section B and attach copies of W-2 forms for all 2020 employers.

We must collect this	information before aware	ding Federal Find	ancial Aid. No further processing will be	done until all documentation is provided.			
SECTION A: STUDEN INFO	<u>PRMATION</u>						
Student Name: Last First		Middle	Initial KWU Student ID # o	KWU Student ID # or Social Security Number I			
Student	Email address			Student Cell Phone number			
SECTION B: FAMILY INFO	RMATION						
Other people if they more than half of the	pouse if you have o I will provide more t I currently live with Their support from Ju	than half of th you, and you ly 1, 2022 thre	neir support from July 1, 2022 t provide more than half of their ough June 30, 2023. attach a sheet with additional fa	r support and will continue to pro	vide		
Full Name		Age	Relationship to Student	College attending in 2022-23			
			P	Kansas Wesleyan University			
Office Use Only:		#		#	Initials		
Initial to the left which on th	O IRS Form 1040, Pune circumstance thates sure to include ea	t is true for y		tax return. tus for 2020. If you, OR your spours the the box below and attach copi			
Re: Student's (and Spouse's) 2020 Tax and Income Information							
I/We used the IRS Data Retrieval Tool within the FAFSA to link and transfer my/our 2020 income tax data into my FAFSA. **** Provide tax filing information for both the student and spouse if completed/filed taxes for 2020. ****							
therefore, I attach (1040) and associa <i>spouse or significa</i>	ed a copy of my/ou ited schedules. <i>I und</i>	r 2020 IRS Tax derstand that is listed in Sec	x Return Transcript OR a <u>signec</u> t I must also provide a signed c	er my/our 2020 income tax data; dcopy of my/our 2020 Tax Return copy of a 2020 Tax Return for my were not married in 2020 becaus			

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	I/We had zero earned	I/We had too little taxable income to be required to file a tax return. Please complete the table below and attach a						
	or taxable income in							
	2020.		copy of all 2020	20 W-2 forms student.				
Em	ployer			Amount earned in 2020	W-2 Attached (Y/N)			
				\$				
				\$				
I DID graduat	e box below for the statem e from High School and have a high		Office Use Only:	HS Transcript Ok: Yes or No				
diploma. I DID receive a GED.			•	IF NO: ☐ HS Transcript Requested from HS				
	e from a home school program.		□ HS Tra	☐ HS Transcript received Dt ☐ HS Transcript Ok: Yes or No				
	ceive a high school diploma or its ec	quivalent from		inscript Ok. Tes Of NO				
umentation app	m high school, a home school propriate to satisfy this federal revou at your KWU email account. GED forwarded to the KWU Off	equirement. If you were	If additional docum admitted with 24 o	nents are needed, the Office or more semester hours, ple	e of Student Financial			
WARNING: If yo	ou purposely give false or mislea subject to a Federa	_	ition in establishing \$20,000, a prison se		ent aid, you may be			
By signing this vocamplete and c	worksheet, I (we) certify that orrect.	t all the info	ormation reported	d to qualify for federal st	tudent aid is			
 Student Signatu	ıre	 Date	 Spouse Sign	nature (Optional)	 Date			



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SECTION F: IDENTITY/ STATEMENT OF EDUCATIONAL PURPOSE (We need your 2020 tax information for parents & student)

(To be completed in front of a Student Financial Planning Representative or Notary Public)

INSTRUCTIONS FOR SUBMISSION OF THIS FORM: (Please read carefully.)

- **Option 1:** Present this form IN PERSON to the Kansas Wesleyan University Office of Student Financial Planning along with an unexpired valid, government-issued photo identification (i.e. driver's license, state-issued photo identification, military identification, or passport). If you present this form in person to the KWU Office of Student Financial Planning, we will maintain a copy of your government photo identification and date received and name of official who collected it.
- **Option 2:** If you are unable to present this form in person to KWU Office of Student Financial Planning, you MUST SIGN BELOW IN THE PRESENCE OF A NOTARY PUBLIC to have this form notarized. Notary publics can typically be found at banking institutions and government offices such as your local County Clerk.

IMPORTANT: Please read and sign the Statement of Educational Purpose below indicating that the statement and all other information contained on this worksheet is true and correct. WARNING! If you purposely give false or misleading information to help establish eligibility for federal student aid, you may be subject to a federal fine of up to \$20,000, a prison sentence, or both. By signing this statement, you certify that all the information reported in and for this student's application for financial aid is complete and accurate.

STATEMENT OF EDUCATIONAL PURPUSE I certify that I ______ am the individual signing this Statement (Print Student's Name) (Print Student's Name) of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Kansas Wesleyan University for 2022-23. **NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT** (for those unable to appear in person in the KWU Student Financial Planning Office) ______, City/County of _____ State of On this date of ______, before me (notary's name), personally appeared (name of person signing this form) and proved to me on basis of satisfactory evidence of identification (type of government-issued photo ID provided) to be the above-named person who signed the foregoing instrument. WITNESS my hand and official seal: My commission expires on: Notary Public's Signature Date Office Use ONLY: Government ID accepted by Attach photocopy of student's government Issued ID. Entered on FAA Access-On-Line on Date Attach FAA Access On Line print-out.

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