

2023-2024 Verification Worksheet Office of Financial Aid FORM IND-V1

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. In order to process your financial aid for the 2023-2024 academic year, we need to gather additional information about you and your spouse (if married) as required by the U.S. Department of Education (34 CFR, Part 668).

To verify the accuracy of the information provided on your application, we will compare your FAFSA with the information on this document and with any other required documents. Saint Xavier University reserves the right to make all necessary changes to your Student Aid Report (SAR).

STUDENT INFORMATION				
Name				
SXU ID Number	Date of Birth			
Phone Number				

If you have questions about the verification process, please contact the Office of Financial Aid at (773) 298-3070 or finaid@sxu.edu. Failure to complete the verification process will result in a delay of financial aid processing or possible loss of eligibility.

You (and your spouse) *must* complete and submit this Verification Worksheet, and any additional documentation requested, before your financial aid will be processed.

FAMILY INFORMATION

List all the people in your household, including:

- Yourself and your spouse (if married).
- Your **children** (and your spouse's children), even if they do not live with you, if you (or your spouse) will provide more than half of their financial support from July 1, 2023, through June 30, 2024.
- Other people if they now live with you and you provide more than half of their financial support, and will continue to provide more than half of their support through June 30, 2024.

Full name of family member	Age	Relationship	Name of college or university family member will attend (at least half-time in a degree, diploma or certificate program) between July 1, 2023, and June 30, 2024, if applicable.
1.		Self	Saint Xavier University
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Please note: SXU may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Pag	ge 2:	<u></u>						
	Student Name (Please Print)	SXU ID Number						
<u>S</u> 1	STUDENT AND SPOUSE (IF MARRIED) TAX AND INCOME INFORMATION							
Check the appropriate box below. Note: only <u>one</u> box should be selected.								
П	☐ I filed a 2021 Federal Tax Return.							
Y R	Instructions: You must provide tax data for yourself and your spouse (if married). The most efficient way to do so is by utilizing the IRS Data Retrieval Tool within the online FAFSA application. By revising your application to link your taxes (if you have not already done so), this requirement is met.							
If you are unable or choose not to utilize the IRS Data Retrieval Tool within the FAFSA, you must submit a 2021 IRS Tax Return Transcript or a signed photocopy of your 2021 Tax Return and applicable schedules. If you and your spouse filed separate tax returns, you must provide tax data for each of you.								
To obtain your tax transcript, go to www.irs.gov and select the option to <i>Get My Tax Record</i> . Please note: only <i>Tax Return Transcripts</i> will be accepted (not <i>Tax Account Transcripts</i>).								
	I (and my spouse) am not required to file (and will elow.	not file) a 2021 Federal Tax Retu	rn. Please follow instructions					
1.	 Instructions: You (and your spouse) must provide an <i>IRS Verification of Non-Filing Letter</i> to confirm that you (and/or your spouse) did not file a 2021 Federal Tax Return. A Verification of Non-Filing Letter can be obtained using IRS Form 4506-T and checking box 7. Please go to www.irs.gov and select the option to <i>Get My Tax Record</i>. Submit a copy of the Non-Filing Letter to the Office of Financial Aid. Were you (or your spouse) employed or did you receive income from work in 2021? Yes No (please check one) 							
	If you indicated Yes above, list below your (and your spouse Employer Name	ise's) employer(s) and the amount ea	rned from each in 2021: 2021 Amount Earned* \$					
○ [*Please note: You must attach a copy of any 2021 W-2s provided	i by your (or your spouse's) employers list	ed above					
Sig agr	ning below certifies that all of the information reported on the ee, if asked, to provide additional information that will verified RNING! If you purposely give false or misleading information that will verified in the control of t	fy the accuracy of this form. The stude	ent must sign and date.					
Student Name (Please Print)		SXU Student ID Number						
Stu	dent Signature	Date						