

2020-2021 DEPENDENT VERIFICATION WORKSHEET

Your 2020-2021 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 and your parents reported on your FAFSA. To verify that you provided correct information GSU 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 and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at GSU. We may need to ask for additional information in the future. If you have questions about verification, contact our office as soon as possible so that your financial aid will not be delayed.

STUDENT INFORMATION

Please complete this verification form and provide copies of all requested paperwork within **15 days** of receipt to Governors State University.

Student Name: _			GSU ID #	Last 4 digits of SS#:			
(Please Print)	Last	First		-			
Permanent Hom	nanent Home Address:						
		City	State	Zip Code			
Student's Date of	f Birth:	Home Phon	e #:	Cell #:			

FAMILY INFORMATION

Please list all members of your household. Remember to include:

- Yourself
- Your parent(s)/step-parent (do not include a parent not living in the household due to separation or divorce)
- Your parents' children, if they receive more than half of their support from your parents from July 1, 2019 through June 30, 2020 or they would be required to provide parental information when applying for federal financial assistance. Do not include children your parents are paying child support for or foster children.
- Other people, if they now live with your parents, they receive more than half of their support from your parents and will continue to do so from July 1, 2019 to June 30, 2020.

Support is defined as providing food, housing, medical/dental care or health insurance, money or other financial resources. If you need more space, attach a separate sheet. **Parents/step-parents should not be included in the number in college.**

FULL NAME Begin with yourself	AGE	RELATIONSHIP	NAME OF COLLEGE For any family member who will be working toward a degree at least half-time during the 2020-2021 academic year. Do not list high schools or names of colleges that your parent(s) are attending.
		Self	Governors State University



Office of Financial Aid University Park, IL 60484 708.534.4480 Fax: 708.534.1172 www.govst.edu/finaid

STUDENT 2018 INCOME

Please choose a scenario:

- □ I utilized the IRS Data Retrieval Tool
- □ I requested a 2018 Tax Return Transcript from the IRS
- □ I was not employed and had no income earned from work in 2018
- □ I was employed during 2018.
 - Must submit W-2 forms for each employer
 - List below the names of all employers and the amount earned from each employer

EMPLOYER NAME	STUDENT AMOUNT
	\$
	¢
	Ъ
	\$

PARENT 2018 INCOME

Please choose a scenario:

- □ My parent(s) utilized the IRS Data Retrieval Tool
- □ My parent(s) requested a 2018 Tax Return Transcript from the IRS
- My parent(s)/step-parent(s) was not employed and had no income earned from work in 2018
 Must submit non-filers statement from the IRS
- □ My parent(s)/step-parent(s) were employed but not required to file taxes during 2018.
 - Must submit non-filers statement from the IRS
 - Must submit W-2 forms for each employer or 1099-MISC
 - List below the names of all employers and the amount earned from each employer

EMPLOYER NAME	FATHER/STEP- FATHER AMOUNT	MOTHER/STEP- Mother Amount	
	\$	\$	
	\$	\$	
	\$	\$	

CERTIFICATION AND SIGNATURES

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student must sign and date this worksheet.

Student's Signature

Date

Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.