

2021-22 Verification Worksheet

Dependent Students

Your financial aid application was selected for review in a process called "Verification." In this process, DU will be comparing your information from your application with your and your parent(s)' 2019 Federal tax information. Federal regulations require us to review this information before offering federal aid. If there are differences between your application information and your financial documents, we may need to make corrections electronically.

Please complete ALL sections of this worksheet, attach requested documentation as appropriate, sign and return to Financial Aid. Incomplete worksheets will not be processed, and verification cannot be completed until all requested documents are received and reviewed.

Please contact us at 303-871-4020 or finaid@du.edu if you have questions while completing this form.

A. Student Information					
First Name	Last Name		M.I.	DU ID Number (87)	
Address (include apt. no.)				Date of Birth	
City	State	Zip Code	Phone Number (Include area code)		
B. Family Information					

List the people in your parent(s)' household, including:

- Yourself
- Your parent(s), even if you do not live with your parent(s):
 - o If your custodial parent has remarried, include your stepparent's information.
 - o If your parents are divorced, separated, or were never married, do not list the non-custodial parent if they do not live in the household
- Your parents' other children, even if they don't live with your parent(s), if (a) your parent(s) will provide more than half of their financial support from July 1, 2021 through June 30, 2022, or (b) the children would be required to provide parental information when applying for federal student aid
- Other people if they now live with your parents, and your parents provide more than half of their financial support and will continue to provide more than half of their financial support from July 1, 2021 through June 30, 2022 (more information may be requested).

Write the names of all household members in the space(s) below. Also, write in the name of the college for any household member, excluding your parent(s), who will be attending at least half time between July 1, 2021 and June 30, 2022, and will be enrolled in a degree, diploma, or certificate program at a college or university that is eligible to award federal student aid funding. If you need more space, please attach a separate page.

Full Name	Age	Relationship	College	Undergraduate or graduate student?
		Self	University of Denver	Undergraduate

a) Log into your FAFSA at www.fafsa.ed.gov and correct your FA b) Provide a signed copy of your 2019 tax return. 2. Income information (required): List the sources of income you received. If none, write "n/a" (form	the IRS data retrieval to AFSA using the IRS data will be considered ince 2019 Amount Received ose one) Yes with the instructions below to	retrieval tool, OR complete if left blank). Did you receive a W-2? (If yes, please provide a copy.)
b) Provide a signed copy of your 2019 tax return. 2. Income information (required): List the sources of income you received. If none, write "n/a" (form Source of Income/Employer D. Parent(s)' Tax and Income Information Did your parent(s) file a Federal Income Tax Return for 2019? (choose Important Note: If your parent(s) filed an amended 2019 tax return, please follow original tax return(s), and then provide a signed copy of their amended Form(s) 1. 1. If your parents filed a tax return and have not already successfully a) Log into your FAFSA at www.fafsa.ed.gov and correct your FA	AFSA using the IRS data n will be considered inc 2019 Amount Received ose one) Yes w the instructions below to	omplete if left blank). Did you receive a W-2? (If yes, please provide a copy.)
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 2. If your parents did not file a tax return: a) Please provide a brief explanation of how your parent(s) suppo b) Your parent(s) must also submit an IRS "Verification of Non-Filito www.irs.gov and clicking on "Get Your Tax Record." If they coffice. 	AFSA using the IRS data orted themselves in 201	retrieval tool, OR 19: nich they can obtain by going
3. Income information (required):		
List the sources of income your parent(s) received. If none, write "n		idered incomplete if blank). W-2 received? (If yes, please
Source of Income/Employer 2	2019 Amount Received	provide a copy.)
E. Print and Sign this Worksheet		
Each person signing this form certifies that all the information reported on it parent must sign and date. Warning: If you purposely give false or misleadir sentenced to jail, or both.		

Parent Signature (required)

Date

Code: FVF-D

Date

Ph: 303.871.4020 | Fax: 303.871.2341 | finaid@du.edu

Student Signature (required)