



2026-2027 (V1) Dependent Student Verification Worksheet

Date:
Trans. #
SAI:
Banner/Verified:
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Your 2026-2027 Free Application for Federal Student Aid (FAFSA) was selected for review in a verification process. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have verification questions, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

Dependent Student Information

Student's Last Name	Student's First Name	Student's M.I.	Student's SFSC ID Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Cell Phone Number (include area code)			Student's Alternate or Home Phone Number

Dependent Student's Family Information

Number of Household Members: List below the people in the parents' household. Include:

- The student.
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parents' other children if they will provide more than half of the children's support from July 1, 2026, through June 30, 2027, or if the other children would be required to provide parental information if they were completing a FAFSA for 2026–2027. Include children who meet either of these standards, even if a child does not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2026.

If more space is needed, provide a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship
		<i>Self</i>

Student's Name: _____ ID: _____

Dependent Student's Income Information to Be Verified

Student

Check the **ONE** that applies

- ☐ The student has used the IRS DRT in *FAFSA on the Web* to transfer 2024 IRS income tax return information into the student's FAFSA.
- ☐ The student is unable or chooses not to use the IRS DRT in *FAFSA on the Web*, and instead will provide the institution with a **2024 IRS Tax Return Transcript(s) or a signed copy of the 2024 income tax return or non-IRS income tax return and applicable schedules.**
- ☐ The student was not employed and had no income earned from work in 2024.
- ☐ The student was employed in 2024 and did not file taxes.
1. Provide copies of all 2024 IRS W-2 forms issued to the student by their employers.
 2. Listed below are the names of all employers, and the amount earned from each employer in 2024. List every employer even if the employer did not issue an IRS W-2 form.

Employer's Name	Annual Amount Earned in 2024
(Example) ABC's Auto Body Shop	\$4,500.00
Total Amount of Income Earned From Work	\$

If more space is needed, provide a separate page with the student's name and ID number at the top.

- ☐ The student has a 2024 Amended IRS income tax return, has a 2024 IRS tax extension, or was a victim of 2024 IRS tax-related identity theft.

Parents

Check the **ONE** that applies

- ☐ The parents have used the IRS DRT in *FAFSA on the Web* to transfer 2024 IRS income tax return information into the student's FAFSA.
- ☐ The parents are unable or choose not to use the IRS DRT in *FAFSA on the Web*, and instead will provide the institution with a **2024 IRS Tax Return Transcript(s) or a signed copy of the 2024 income tax return or non-IRS income tax return and applicable schedules**
- ☐ Neither parent was employed, and neither had income earned from work in 2024.
- ☐ One or both parents were employed in 2024 and did not file taxes.
1. Provide copies of all 2024 IRS W-2 forms issued to the parent by their employers.
 2. Listed below are the names of all employers, and the amount earned from each employer in 2024. List every employer even if the employer did not issue an IRS W-2 form.

Employer's Name	Annual Amount Earned in 2024
(Example) ABC's Auto Body Shop	\$4,500.00
Total Amount of Income Earned From Work	\$

If more space is needed, provide a separate page with the student's name and ID number at the top.

- ☐ One or both parents have a 2024 Amended IRS income tax return, have a 2024 IRS tax extension, or were a victim of 2024 IRS tax-related identity theft.

Dependent Student's Untaxed Income

2024 Untaxed Income

Payments to tax-deferred pension, retirement savings plans, IRA deductions, child support received, veteran's non-education benefits, other untaxed income, etc.

Student

\$ _____

Parents

\$ _____

Certification and Signature

By signing below, you certify that the information reported is complete and correct.

Student's Signature

Date

Parent's Signature

Date

Please submit all documents to SFSC Financial Aid Office
600 West College Drive, Building B, Avon Park, FL 33825
OR E-mail: Financialaid@southflorida.edu