



2026-2027 (V5) Dependent Student Verification Worksheet

Date:
Trans. #
SAI:
Banner/Verified:
Locked:

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, 2027.

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		Parents Check the ONE that applies																									
<input type="checkbox"/> The student <u>has used</u> the IRS DRT in <i>FAFSA on the Web</i> to transfer 2024 IRS income tax return information into the student's FAFSA.		<input type="checkbox"/> The parents <u>have used</u> the IRS DRT in <i>FAFSA on the Web</i> to transfer 2024 IRS income tax return information into the student's FAFSA																									
<input type="checkbox"/> The student is <u>unable or chooses not to use</u> the IRS DRT in <i>FAFSA on the Web</i> , 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 .		<input type="checkbox"/> The parents are <u>unable or choose not to use</u> the IRS DRT in <i>FAFSA on the Web</i> , 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																									
<input type="checkbox"/> The student was not employed and had no income earned from work in 2024.		<input type="checkbox"/> Neither parent was employed, and neither had earned income from work in 2024.																									
<input type="checkbox"/> The student was employed in 2024 and did not file taxes.		<input type="checkbox"/> 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 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.		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.																									
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<input type="checkbox"/> 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.																											
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Dependent Student's Untaxed Income		
2024 Untaxed Income	Student	Parents
Payments to tax-deferred pension, retirement savings plans, IRA deductions, child support received, veteran's non-education benefits, other untaxed income, etc.	\$ _____	\$ _____

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

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

Student's Name: _____ ID: _____

Identity Statement

The student must appear in person at South Florida State College to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed and the name of the official at the institution authorized to receive and review the student's ID.

Certification and Signature:

Each person signing below certifies that all of the verification documents submitted with this certification are complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Student's Signature

Date

Parent's Signature

Date

I, _____, certify that _____ appeared
(School Official) (Name of Student)

before me in person on _____ and student provided a copy of _____
(Name of Unexpired Valid Government -Issued Photo ID)

SFSC Staff Member Signature (Required)

Date

If the student is unable to appear in person at **South Florida State College** to verify his or her identity, the student schedule a zoom meeting with the financial aid office to satisfy evidence of identification:

Video Call Option:

On, _____ before me, _____
(Date) (FAO)

_____ appeared on video call (Zoom) and proved to me satisfactory
(Name of Student)

evidence of identification. _____
(Type of unexpired government-issued photo provided)

(FAO 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

Student's Name: _____ ID: _____

**Identity Purpose
To be signed in the Presence of a Notary**

If the student is unable to appear in person at **South Florida State College** to verify his or her identity, the student must provide to the institution:

(a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport.

Notary's Certificate of Acknowledgement

State of _____ City/County of _____

On _____, before me, _____,
(Date) (Notary's name)

personally appeared, _____, and proved to me on the
(Printed name of signer)

basis of satisfactory evidence of identification _____ to be
(Type of unexpired government-issued photo ID provided)

the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

_____ (Notary signature)

_____ (seal)

My commission expires on _____
(Date)

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