



2024-2025

Independent Verification Worksheet

Student Name: _____

Last 3 Digits of Student ID: _____

Complete steps 1 through 4. Once all documents/forms have been submitted, please allow several weeks for processing. **Students will be notified only if verification results in a change to their offer.**

STEP 1: STUDENT TAX INFORMATION

Check one of the following:

- I was not required to file a 2022 Federal Tax Return and had some or no income. I listed all the employers and the amount earned in 2022 in the box below. (Provide copies of all 2022 W-2s/1099 forms)

Employer's Name	W-2 provided?	Annual Amount Earned in 2022

- I filed a 2022 tax return and used the Direct Data Exchange on the FAFSA. (Transferred tax information from IRS to FAFSA)
- I filed a 2022 tax return but was unable to use the Direct Data Exchange and have attached a SIGNED copy of my 2022 Tax Return and schedules. (If you do not have copies of your tax return you may request a tax transcript at www.irs.gov by clicking "Get Your Tax Record" and requesting a "Return Transcript.")

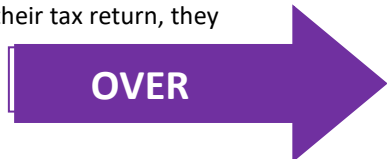
STEP 2: SPOUSE TAX INFORMATION

Check one of the following (skip this section if this does not apply):

- My spouse was not required to file a 2022 Federal Tax Return and had some or no income. They listed all their employers and the amount earned in 2022 in the box below. (Provide copies of all 2022 W-2s/1099 forms)

Employer's Name	W-2 provided?	Annual Amount Earned in 2022

- My spouse filed a 2022 tax return and used the Direct Data Exchange on the FAFSA. (Transferred tax information from IRS to FAFSA)
- My spouse filed a 2022 tax return but was unable to use the Direct Data Exchange and has attached a SIGNED copy of their 2022 Tax Return and schedules. (If they do not have copies of their tax return, they may request a tax transcript at www.irs.gov by clicking "Get Your Tax Record" and requesting a "Return Transcript.")



STEP 3: FAMILY SIZE

Fill in the following information:

1. List yourself (the student):

Student's Name	Student's Age

1. List your spouse if you are married:

Spouse's Name	Spouse's Age

2. List your children or other people that live with you and received/will continue to receive more than half of their financial support from you during the award year.

Full Name	Age	Relationship to Student

STEP 4: CERTIFICATION

Each person signing below certifies that all the information reported is complete and correct.

Student Name: _____ Date: _____

Student Signature: _____

Spouse Name: _____ Date: _____

Spouse Signature: _____

STEP 5: EMAIL, MAIL, FAX, OR DROP OFF DOCUMENTS TO STUDENT FINANCIAL AID

Email documents to finaid@mountunion.edu

Mail to the Office of Student Financial Aid, 1972 Clark Ave, Alliance, OH 44601

Fax documents M-F 8-4 to (330) 829-2814

Please do not send any personally identifiable information via email (e.g. Social Security Numbers, dates of birth, etc.).

Questions? Contact the Office of Student Financial Aid
(330) 823-2674 finaid@mountunion.edu