

Student's Name _____

Student's ID Number _____

2023-24 V5 Aggregate Independent Student Nontax Filer Verification Worksheet

Student Information

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

Verification of 2021 Income Information for Student Nontax Filers

The instructions and certifications below apply to the student and spouse, if the student is married. Complete this section if the student and spouse will not file and are not required to file a 2021 income tax return with the IRS.

Check the box that applies:

- ☐ The student and spouse were not employed and had no income earned from work in 2021.
- ☐ The student and/or spouse were employed in 2021 and have listed below the names of all employers, the amount earned from each employer in 2021, and whether an IRS W-2 form or an equivalent document is provided. [Provide copies of all 2021 IRS W-2 forms issued to the student and spouse by their employers]. List every employer even if the employer did not issue an IRS W-2 form.

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

Employer's Name	IRS W-2 or an Equivalent Document Provided?	Annual Amount Earned in 2021
<i>(Example) ABC's Auto Body Shop</i>	<i>Yes</i>	<i>\$4,500.00</i>
Total Amount of Income Earned From Work		\$

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Provide documentation from the IRS or other relevant tax authority dated on or after October 1, 2022 that indicates a 2021 IRS income tax return was not filed with the IRS or other relevant tax authority, or a signed statement certifying that the individual attempted to obtain confirmation of nonfiling from the IRS or other relevant tax authority and was unable to obtain the required documentation.

____ Check here if confirmation of nonfiling or a signed statement is provided.

____ Check here if confirmation of nonfiling or a signed statement will be provided later.

Number of Household Members and Number in College

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

- The student.
- The student's spouse, if the student is married.
- The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2023 through June 30, 2024, even if a child does not live with the student.
- Other people if they now live with the student and the student or spouse provides 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, 2024.

Number in College: Include in the space below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2023 and June 30, 2024, and include the name of the college.

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

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)
		<i>Self</i>		

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Identity and Statement of Educational Purpose
(To Be Signed at the Institution)

The student must appear in person at _____ to
(Name of Postsecondary Educational Institution)

verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a 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.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

Identity and Statement of Educational Purpose
(To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at _____
(Name of Postsecondary Educational Institution)

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; and
- (b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Statement of Educational Purpose

I certify that I _____ am the individual signing
(Print Student's Name)

this Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending _____ for 2023-2024.

(Name of Postsecondary Educational Institution)

(Student's Signature)

(Date)

(Student's ID Number)

Verificación de Identidad y Declaración de Propósito Educativo
(Para ser firmadas en la institución)

El estudiante debe comparecer en persona en _____ para
(Nombre de la institución educativa postsecundaria)

verificar su identidad mediante la presentación de una identificación con fotografía (ID) válida emitida por el gobierno que no haya expirado, como una licencia de conducir, otro tipo de identificación emitida por el estado o pasaporte, entre otros. La institución conservará una copia de la identificación con fotografía del estudiante en la cual se anotará la fecha en la que se recibió y revisó, y el nombre del funcionario de la institución autorizado a recibir y revisar las identificaciones de los estudiantes.

Además, el estudiante debe firmar, en presencia del funcionario de la institución, la Declaración de Propósito Educativo proporcionada a continuación.

Verificación de Identidad y Declaración de Propósito Educativo
(Para ser firmadas en presencia de un notario)

Si el estudiante no es capaz de comparecer en persona en _____
(Nombre de la institución educativa postsecundaria)
para verificar su identidad, el mismo debe proporcionar a la institución:

- (a) una copia de la de identificación con fotografía (ID) válida emitida por el gobierno que no haya expirado, que se reconoce en la declaración del notario que aparece a continuación, o que se presenta ante un notario, como una licencia de conducir, otro tipo de identificación emitida por el estado o pasaporte, entre otros; y
- (b) la Declaración de Propósito Educativo original proporcionada a continuación debe ser notariada. Si la declaración del notario aparece en una página separada de la Declaración de Propósito Educativo, se debe indicar de manera clara que la Declaración de Propósito Educativo era el documento notariado.

Declaración de Propósito Educativo

Certifico que yo, _____, soy el individuo que firma esta
[Imprimir nombre del estudiante]

Declaración de Propósito Educativo, y que la ayuda financiera federal estudiantil
que yo pueda recibir sólo será utilizada para fines educativos y para pagar el
costo de asistir a _____ para 2023-2024.
[Imprimir nombre de institución educativa postsecundaria]

[Firma del estudiante]

[Fecha]

[Número de identificación del estudiante]

Student's Name _____

Student's ID Number _____

Sample of a Notary's Certificate of Acknowledgement

Notary's certification may vary by State

State of _____

City/County of _____

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

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

because of satisfactory evidence of identification _____
(Type of unexpired government-issued photo
ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(seal)

(Notary signature)

My commission expires on _____
(Date)

Student's Name _____

Student's ID Number _____

Certifications and Signatures

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

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

Print Student's Name

Student's ID Number

Student's Signature (Required)

Date

Spouse's Signature (Optional)

Date