

Student Name

Verification Worksheet (Independent) 2021-2022

		Currently	Date of marriage	
Complete the table below for yourself, the student.				
STUDENT CURRENT HOUSEHOLD INFORMATION				
For more information on verification and other important terr	ns, piease v	risit <u>iviiamiOH.ed</u>	du/verification.	
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	First/Last Name	Age	Currently Married?	Date of marriage (if applicable)
Self:			☐ Yes	Month:
Seii.			□ No	Year:

Complete the table below for the student's spouse, if applicable, and all children that will have more than half of their support provided by the student through June 30, 2022, even if they do not live with the student.

First/Last Name	Relationship to Student	Age	Enrolled at least half time in college? (Yes or No)	Full Name of College*
	Spouse (if applicable)		Yes No	
			Yes No	

Complete the table below for any additional household members who now live with the student and the student provides more than half of their support and will continue to provide more than half of their support through June 30, 2022.

First/Last Name	Relationship to Student	Age	Enrolled at least half time in college? (Yes or No)	Full Name of College*
			Yes No	
			Yes No	
			Yes No	

^{*}Include the college name for any household member (who meets criteria above) who will be enrolled at least half time, in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2021 and June 30, 2022. If more space is needed, attach a separate page. Please include the student's Banner ID on all submitted documents.



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tudent Name			Banner ID +			
		FEDERAL TAX R	ETURN FILING S	TATUS		
Did the Student file	o tayos for 2					
Yes	e taxes for 2)19:				
_	ll be filing. (A	Additional documentation	n will be requested	d via email.	.)	
_		and will not be filing. *C	•		-	and see the Student
	•	ions on submitting requir		•		
Did the Student's S	Spouse file ta	ixes for 2019?				
☐ Yes						
☐ No, but wi	ll be filing. (A	Additional documentation	າ will be requeste	d via email.	.)	
	•	and will not be filing. *C		•	x below	and see the Student
		ions on submitting requir	red documentatio	n.		
☐ Not applic	able					
omplote the F	mnlovma	ant hav halaw ONLY	for those wh	o will no	t ha f	iling taxes for 2019.
omplete the i	.iiipioyiiie		PLOYMENT	io <u>will lic</u>	<u>n</u> be ii	illing taxes for 2019.
2019 Income	Employed	Employer(s) I		W-2 or 1099 Received		Wages (Box 1 on W-2. If W-2 was not issued, list earnings from job.)
6	☐ Yes	1)		Yes	No	\$
Student	□ No	2)		Yes	No	\$
Student's Spouse	☐ Yes	1)		Yes	No	\$
(if applicable)	□ No	2)		Yes	No	\$
clude the student	's Banner ID	nit original document(s) on all submitted docum information reported to sleading information may	ents. qualify for federa	l student ai	d is com	
tudent Signature (Wet signatu	e only) Date				

Please return this form to the One Stop: