



# FINANCIAL AID OFFICE

2500 S. Main, Hope, AR 71802 | (870) 722-8264 | Fax: (870) 722-8145 | www.uaht.edu

## 2022-2023 Verification Worksheet Dependent Student

### INSTRUCTIONS:

Your FAFSA was selected by the U.S. Department of Education for a review process called "Verification." Verification must be completed before your financial aid can be finalized and before any federal aid may be credited to your student account. If there are differences between your FAFSA and this information, we will update your FAFSA, recalculate your aid eligibility and send a revised financial aid package.

- Sign on the bottom of the second page and return the completed form, along with all requested documentation, to the Financial Aid Office. This signature gives UAHT permission to request your tax return transcript for you.
- Verification cannot be completed until all requested documents are received and reviewed.
- If tax information must be verified, a signed copy of your tax return is acceptable to complete this process. Also, you can either correct your FAFSA by using the IRS Data Retrieval Tool or submit a copy of your IRS Tax Return Transcript to verify income.

Student Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone/Cell: \_\_\_\_\_ Email: \_\_\_\_\_

### A. HOUSEHOLD INFORMATION:

Write the names, ages, and relationship to student of all household members. For any household members (not parents) who will be attending college at least half-time between July 1, 2022, and June 30, 2023, and will be enrolled in a degree or certificate program, write the name of the college he/she is attending. When listing the persons in your parent's household, include:

- ✓ yourself, even if you do not live with your parent(s), (1<sup>st</sup> row in box below)
- ✓ your parent(s), including stepparent.
- ✓ your parent's other dependent children and/or other people in the home, if your parent(s) provide more than half of their support and will provide more than half of their support from July 1, 2022, through June 30, 2023, or they would be required to give parental information when applying for Federal Student Aid.

| Full Name of All Household Members | Age | Relationship to Student (parent, sibling, etc.) | College (attending at least ½ time in 2022-23)             |
|------------------------------------|-----|---|--|
|                                    |     | Student-Self                                    | University of Arkansas Community College at Hope-Texarkana |
|                                    |     |   |  |
|                                    |     |   |  |
|                                    |     |   |  |
|                                    |     |   |  |



# FINANCIAL AID OFFICE

2500 S. Main, Hope, AR 71802 | (870) 722-8264 | Fax: (870) 722-8145 | www.uaht.edu

STUDENT'S NAME \_\_\_\_\_ UAHT ID# \_\_\_\_\_

**B. STUDENT TAX/INCOME INFORMATION: *If the IRS data retrieval tool was used, skip this section.***

Did you file a Federal Income Tax Return for 2020?  Yes  No

- If you answered YES, update your FAFSA by using the IRS data retrieval tool or attach a copy of your 2020 Federal tax return transcript from the IRS or a signed copy of your 2020 income tax return.
  - To use the IRS data retrieval tool, log into your FAFSA online at: <https://studentaid.ed.gov/sa/fafsa>.
  - Request a free copy of your 2020 Federal tax return transcript on the IRS website at [www.irs.gov](http://www.irs.gov); click on "Get My Tax Record" enter information as requested; select Type -Return Transcript and 2020 year or call 1-800-908-9946.
  - I give permission to University of Arkansas Community College at Hope-Texarkana to request my tax return transcript to be mailed to me.
- If you answered NO, attach a photocopy of your 2020 W-2s and unemployment documents (if applicable) and identify your untaxed earnings in the table below.
  - Provide proof of non-tax filing status by requesting your 2020 tax return transcript at [www.irs.gov](http://www.irs.gov).

| Employer's Name                     | Did you receive a W-2 | Annual Amount Earned in 2020 |
|-------------------------------------|-----------------------|------------------------------|
| (example) ABC's Babysitting Service | No                    | 2300                         |
|                                     |                       |                              |
|                                     |                       |                              |
|                                     |                       |                              |

**C. PARENT TAX/INCOME INFORMATION: *If the IRS data retrieval tool was used, skip this section.***

Did or will you (and/or your spouse) file a Federal Income Tax Return for 2020?  Yes  No

- If you answered YES, update your FAFSA by using the IRS data retrieval tool or attach a copy of your 2020 Federal tax return transcript from the IRS or a signed copy of your 2020 income tax return.
  - To use the IRS data retrieval tool, log into your FAFSA online at: <https://studentaid.ed.gov/sa/fafsa>.
  - Request a free copy of your 2020 Federal tax return transcript on the IRS website at [www.irs.gov](http://www.irs.gov); click on "Get My Tax Record" enter information as requested; select Type -Return Transcript and 2020 year or call 1-800-908-9946.
  - I give permission to University of Arkansas Community College Hope-Texarkana to request my tax return transcript to be mailed to me.
- If you answered NO, attach a photocopy of your (and your spouse's) 2020 W-2s and unemployment documents (if applicable) and identify your untaxed earnings in the table below.
  - Provide proof of non-tax filing status by requesting your 2020 tax return transcript at [www.irs.gov](http://www.irs.gov).

| Employer's Name                     | Did you receive a W-2 | Annual Amount Earned in 2020 |
|-------------------------------------|-----------------------|------------------------------|
| (example) ABC's Babysitting Service | No                    | 2300                         |
|                                     |                       |                              |
|                                     |                       |                              |
|                                     |                       |                              |

I hereby certify that all statements and information provided on this form are true, complete, and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to give proof of the information that I have given on this form. I understand it is a federal crime to purposefully give false or misleading information on this form and that any person doing so may be subject to a fine, imprisonment, or both. (Signatures must be provided by the student and one parent who is listed on the FAFSA.)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_