

Office of Student Financial Services (SFS)

514 University Avenue

Selinsgrove, Pennsylvania 17870-1164

Student ID

T: 570.372.4450
F: 570.372.2722
E: sfs@susqu.edu
https://www.susqu.edu/

2023-2024 VERIFICATION FORM - DEPENDENT STUDENT

	Last	First	MI		
Student Date of Birth					
Student Telephone#	_()	Student ema	il		
Parent Telephone #	()	Parent email			
			s (SFS) as soon as possible so that your Financial Services staff at (570) 372-4450.		
The U.S. Department of Education has selected your FAFSA for review in a process called "verification." SU is required to collect information in this format to confirm that you have entered correct information on your FAFSA. Your financial aid cannot be processed until all requested information is received. Failure to complete verification by the last enrolled day of the award period will result in a loss of aid. This review must be conducted under the financial aid program rules (34 CFR, Part 668). Please note that the Verification process will not be complete until all required documentation is received					
Successful completion of the threath of the student's parent(s).	ne Verification process requires that	families provide inc	come information for both the student AND		
<mark>For tax filers</mark> - If you did not provide:	submit your 2023-2024 FAFSA usi	ng the IRS Data Re	strieval Tool (DRT), you must obtain and		
 A copy of your 202 tax preparer inform 		1, 2, and 3 (if filed),	and signed by the tax payer or containing		
 A copy of your 202 	21 IRS Tax Return Transcript				
o Call th	ne IRS at 1-800/908-9946, or go to <u>l</u>	http://www.irs.gov/l	Individuals/Get-Transcript, to order.		
For Parent non-tax filers - Obtain a Confirmation of Non-Filing from the IRS by submitting Form 4506-T to the IRS (check box 7). Each non-filing parent in the household must provide this confirmation.					

FAMILY INFORMATION

Student Name

List the people in **your parent's household**. Include the following:

- your parents (including stepparent) and yourself, even if you don't live with your parents, and
- your parents' other children, even if they don't live with your parents, if: (a) your parents will provide more than half of their support from July 1, 2023, through June 30, 2024, **AND** (b) the children are under age 24 and neither married nor veteran of the armed services **and**
- other people if they now live with your parents AND your parents provide more than half of their support AND will continue to provide more than half of their support from July 1, 2023, through June 30, 2024.

Also write in the name of the college for any household member who will be attending college at least half-time between July 1, 2023 and June 30, 2024, AND will be enrolled in a degree, diploma, or certificate program. Attach additional sheet if necessary.

Full Name	Age	Relationship	College
		Self (You/Student)	Susquehanna University

STUDI	ENT NAME:					
	LING AND INCOME INFORMATION nt: Were you required to file a 2021 Federal Income Tax	Return? Check one box below	<i>v</i> .			
	YES. You must provide income information on the FAFSA using the IRS data retrieval tool, OR provide an IRS tax return transcript. **Do <i>NOT</i> sign and date under the "NO" statement if checking "YES"**					
	NO. Sign at the end of the following statement, complete the table below, and attach all W-2s: I certify that I did not and will not file a federal tax return for calendar year 2021. I further certify that I have given accurate and complete account of all taxable earnings and non-taxable benefits. I have included money received or paid on my behalf during calendar year 2021. Student signature:					
_						
Er	nployer name	2021 Wages				
<u>Parent</u>	t(s): Were you required to file a 2021 Federal Income Ta	ax Return? Check one box belo	W.			
	YES. You must provide income information on the FAFSA using the IRS Data Retrieval Tool (DRT) OR provide necessary documentation outlined on pg. 1 of this form. **Do NOT sign and date under the "NO" statement if checking "YES"**					
	NO. Sign the following statement, complete the table below and attach all W-2s. You must also provide a Confirmation of Non-Filing from the IRS by submitting Form 4506-T to the IRS (check box 7). I certify that I did not and will not file a federal tax return for calendar year 2021. I further certify that I have given accurate and complete account of all taxable earnings and non-taxable benefits. I have included money received or paid on my behalf during calendar year 2021. Parent signature:					
Er	mployer name	2021 Wages				
CERTIF	YING SIGNATURES					
We ce	rtify that all the information reported on this worksheet i	s complete and correct.				
	ng: If you purposely give false or misleading information	·	e fined, be sentenced to jail, or			
Studer	nt Signature		Date			
Parent	t Signature		Date			

Please return by mail or fax: Student Financial Services Susquehanna University 514 University Ave. Selinsgrove, PA 17870 FAX: 570/372-2722