



**2021-2022 DEPENDENT STUDENT VERIFICATION WORKSHEET (DV1)**

**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 process a revised financial aid package. Please complete ALL sections of this worksheet, attach requested documentation, and sign and return to the Student Financial Aid Office. Verification cannot be completed until all requested documents are received and reviewed.

- If your parent did not file 2019 income taxes you may be contacted by our office to submit a verification of non-filing.

**A. STUDENT INFORMATION**

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

Student ID#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**B. HOUSEHOLD INFORMATION**

List in the chart below the people in your **parent(s)' household**. Include:

- Yourself, even if you don't live with your parent(s);
- Your parent(s), (including stepparent) even if you don't live with your parent(s);
- Your parent(s)' other dependent children if your parent(s) will provide more than half of their support from July 1, 2021, through June 30, 2022, even if the children do not live with them;
- Other people, if they now live with your parent(s) and they will provide more than half of their support and will continue to provide more than half of their support through June 30, 2022.
- Also, write the name of the college for any household member who will be enrolled in a degree or certificate program at least half-time between July 1, 2021 and June 30, 2022. If you need more space attach a separate page.

Full Name	Age	Relationship to Student	College
		Self	Baptist Health Science University

**C. STUDENT TAX INCOME INFORMATION**Did you file a Federal Income Tax Return for 2019? (Circle one) **Yes** **No**1. If you answered **YES**, check the box that applies:

- I **have used** the IRS Data Retrieval Tool to transfer my **2019** IRS income information into my FAFSA.
- I will submit my **2019 IRS tax return or tax transcript**

2. If you answered **NO**, check the box that applies:

- I **WAS NOT** employed and had **NO** income earned in 2019.
- If you answered **NO**, but worked in 2019, attach a photocopy of your 2019 W-2s and unemployment documents (if applicable). **List every employer or any Untaxed Income you may have received.**

Employer's Name and/or Untaxed Income	2019 Amount Earned	IRS W-2 Provided?

**D. PARENT(S) TAX INCOME INFORMATION**Did you (and/or your spouse) file a Federal Income Tax Return for 2019? (Circle one) **Yes** **No**1. If you answered **YES**, check the box(s) that applies:

- I **have used** the IRS Data Retrieval Tool to transfer their **2019** IRS income information into the FAFSA.
- I will submit my **2019 IRS tax return or tax transcript**

2. If you answered **NO**, check the box that applies:

- I and/or my spouse was unemployed and had **NO** income earned from work in 2019.
- I worked in 2019 and will attach a photocopy of my 2019 W-2s and unemployment documents (if applicable). **List every employer or any Untaxed Income you may have received.**

Employer's Name and/or Untaxed Income	2019 Amount Earned	IRS W-2 Provided?

**E. CERTIFICATION AND SIGNATURE**

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

**WARNING:** If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

\_\_\_\_\_  
Student's Signature (Required)\_\_\_\_\_  
Date (Required)\_\_\_\_\_  
Parent's Signature (Required)\_\_\_\_\_  
Date (Required)