



2022–2023 Dependent Verification Worksheet

Federal Student Aid Programs

Your **2022–2023** Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided the correct information the financial aid office at Molloy University will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. **You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid office at Molloy University.** Molloy University may ask for additional information. If you have questions about verification, contact your financial aid office as soon as possible so that your financial aid will not be delayed.

A. Dependent Student's Information

Student's Last Name

Student's First Name

Student's M.I.

Student's ID Number

Student's Street Address (include apt. no.)

Phone number (include area code)

City

State

Zip Code

B. Dependent Student's Family Information

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

- Yourself and your parent(s) (including a stepparent) even if you don't live with your parent(s).
- Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2022, through June 30, 2023, or if the other children would be required to provide parental information if they were completing a FAFSA for 2022–2023. Include children who meet either of these standards, even if they do not live with your parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2023.

Include the name of the college for any household member, excluding your parent(s), 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, 2022, and June 30, 2023. *If more space is needed, attach a separate page with the student's name and Student ID at the top.*

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>	<i>Central University</i>	<i>Yes or No</i>
		<i>Self</i>		

Student Name

Student's ID Number

C. Dependent Student's Income Information to Be Verified
☐ Check here if the student's 2020 IRS tax return transcript is attached to this worksheet.

☐ Check here if you used the IRS Data Retrieval Tool on the FAFSA

1. **TAX RETURN NONFILERS**—Complete this section if the student will not file and is not required to file a 2020 income tax return with the IRS.

Check the box that applies:
☐ The student was not employed and had no income earned from work in 2020.

☐ The student was employed in 2020. List below the names of all the student's employers, the amount earned from each employer in 2020. Attach copies of all 2020 W-2 forms issued to the student by employers. *List every employer even if they did not issue a W-2 form. If more space is needed, attach a separate page with the student's name and Student ID Number at the top.*

Employer's Name	2020 Amount Earned	W-2 Attached?
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00(example)</i>	<i>Yes(example)</i>

- D. **Parent's Income Information to Be Verified**—Note: If two parents were reported in Section B of this worksheet, the instructions and certifications below refer and apply to both parents.

☐ Check here if the parent(s) 2020 IRS tax return transcript(s) is attached to this worksheet

☐ Check here if your parent(s) used the IRS Data Retrieval Tool on the FAFSA

2. **TAX RETURN NONFILERS**—Complete this section if the student's parent(s) will not file and is not required to file a 2020 income tax return with the IRS.

Check the box that applies:
☐ The parent(s) was not employed and had no income earned from work in 2020.

☐ The parent(s) was employed in 2020 and was not required to file tax returns. List below the names of all the parent's employers, the amount earned from each employer in 2020. Attach copies of all 2020 W-2 forms issued to the parent(s) by employer(s). *List every employer even if they did not issue a W-2 form. If more space is needed, attach a separate page with the student's name and Student ID Number at the top.*

Employer's Name	2020 Amount Earned	W-2 Attached?
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00 (example)</i>	<i>Yes (example)</i>

Student Name

Student's ID Number

E. Verification of Untaxed Income for 2020

(If any item does not apply, enter "N/A" for Not Applicable or enter 0 where a response is requested).

	<u>Student</u>	<u>Parent 1</u>	<u>Parent 2</u>
<input type="checkbox"/> Educational Credits	\$ _____	_____	_____
<i>(American Opportunity Tax Credit and Lifetime Learning Credit) from IRS Form 1040-Schedule 3, line- 3).</i>			
<input type="checkbox"/> IRA deductions and Payments	\$ _____	_____	_____
<i>(To self-employed SEP, SIMPLE, Keogh and other qualified plans from IRS Form 1040- Schedule 1, Line 15 + line-19).</i>			
<input type="checkbox"/> Untaxed IRA, Pensions and Annuities	\$ _____	_____	_____
<i>(From IRS Form 1040-line (4a+5a) minus line (4b+5b) . Excludes rollovers. If negative, enter a zero here).</i>			
<input type="checkbox"/> Tax exempt interest income	\$ _____	_____	_____
<i>(From IRS Form 1040-line 2a).</i>			
<input type="checkbox"/> Other 2020 untaxed income	\$ _____	_____	_____

*(List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as disability, Black Lung Benefits, **untaxed portions of health savings accounts from IRS Form 1040 Schedule 1, Line 12**, Railroad Retirement Benefits, etc. **Do not include**, additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA), combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels).*

F. Certification and Signatures

Each person signing this worksheet certifies that all of the Information reported on it is complete and correct.
The student and one parent must sign and date.

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

Student's Signature

Date

Parent's Signature

Date

***Do not mail this worksheet to the U.S. Department of Education.
Submit this worksheet to the financial aid office***