

Student Name

sheet if necessary.

Office of Student Financial Services (SFS)

Student SSN _____

514 University Avenue Selinsgrove, Pennsylvania 17870-1164

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

2020-2021 VERIFICATION FORM - INDEPENDENT STUDENT

Last	First	MI	
Student Date of Birth			
Student Telephone # ()	St	tudent email	
		t Financial Services (SFS) as soon se contact the SFS Office staff at (
to collect information in this for cannot be processed until all ro the award period will result in a	mat to confirm that you have ento equested information is received. a loss of aid. This review must be	for review in a process called "ver ered correct information on your F . Failure to complete verification be e conducted under the financial aid not be complete until <u>all</u> requ	FAFSA. Your financial aid by the last enrolled day of d program rules (34 CFR,
Successful completion of the \spouse (if applicable).	/erification process requires stud	dents provide income information	for both themselves AND
For tax filers - If you did not provide to the Student Financia		A using the IRS Data Retrieval To	ool, you must obtain and
 A copy of your 2018 T tax preparer information 		1, 2, and 3 (if filed), signed by th	e tax payer or containing
 A copy of your 2018 IF 	RS Tax Return Transcript		
 Call the IR 	kS at 1-800/908-9946, or go to <u>ht</u>	tp://www.irs.gov/Individuals/Get-T	ranscript, to order.
		2018 from the IRS by submitting ent nor the student's spouse filed	
FAMILY INFORMATION			
List the people in your housel	nold. Include the following:		
 yourself, and your spo 	use if you have one, and		
 your children, if you wi 	Il provide more than half of their :	support from July 1, 2020 through	June 30, 2021, and

Full Name Age Relationship College

Self (Student) Susquehanna University

Also write in the name of the college for any household member who will be attending college at least half-time between July 1, 2020 and June 30, 2021, **AND** will be enrolled in a degree, diploma, or certificate program. Attach an additional

other people if they now live with you AND you provide more than half of their support AND will continue to

provide more than half of their support from July 1, 2020 through June 30, 2021.

STUDENT NAME:				
TAX FILING AND INCOME INFORMATION				
Student: check one box below. Were you required to file a 2	2018 Federal Income Tax Return?			
☐ YES. You must provide income information on the tax return transcript.	FAFSA using the IRS data retrieval too, OR provide an IRS			
■ NO. Sign the following statement, complete the table below and attach all W-2's. You must also provide a Confirmation of Non-Filing from the IRS by submitting Form 4506-T to the IRS (check box 7).				
	tax return for calendar year 2018. I further certify that I all taxable earnings and non-taxable benefits. I have uring calendar year 2018.			
Student signature:	Date:			
Employer name	2018 Wages			
SIGN THIS WORKSHEET	tio computate and comput			
I/We certify that all the information reported on this workshee				
sentenced to jail, or both.	information on this worksheet, you may be fined, be			
Student Signature	Date			
Spouse Signature	Date			
Please return to by mail or fax to:				

Student Financial Services Susquehanna University 514 University Ave. Selinsgrove, PA 17870

FAX: 570/372-2722