

## Verification Worksheet 2025–2026

Please upload all documents using the Document Upload through your MySSU account. You may also mail your information to: Shawnee State University, Financial Aid Office, 940 Second Street, Portsmouth Ohio, 45662 or fax to 877.940.2505. Please do not email any documents.

Student Information				
Name			Student ID	
Address (include Ap	ot. Number)	Date of Birth		
City	State	Zip	Phone Number (include area code)	
Family Inform	mation (check one)			
(B) your child if they now li	dren, if you will provide mor	re than half of their support fre e more than half of their suppo	(a) yourself and your spouse if you are married; om July 1, 2025 through June 30, 2026; (C) other people ort and will continue to provide more than half of their	
stepparent) e parent(s), if y would be req with your par	ven if you don't live with yo your parents will provide mo juired to provide parental in	our parents; (B) your parents' or ore than half of their support for formation when applying for F ride more than half of their sup	ude: (A) yourself and your parent(s) (including other children, even if they don't live with your rom July 1, 2025 through June 30, 2026 or the children Federal Student Aid; (C) other people if they now live opport and will continue to provide more than half of	

## List the names and ages of all household members in the space below:

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
Marty Jones (example)	28	Wife	Central University	Yes
		SELF		

<sup>\*</sup>If any household members will be attending college at least half-time between July 1, 2025 and June 30, 2026, and will be enrolled in a degree or certificate program, include the name of the college.

Student Name:		
Student ID:		
Please visit the Financial Aid website's FAFSA verification lin an amended IRS income tax return, or were victims of IRS ic		
Student and Spouse (if married) Tax and Inc	come Information	
Check the box that applies (check only one):		
Tax Filers:		
☐ The student and spouse (if married) has filed Data Retrieval tool in FASFA on the web.	taxes and will provide a 2023 tax return t	ranscript or complete the IRS
Non-tax Filers:		
☐ The student and/or spouse was not employed Please request and submit a verification of Non-Filin		n 2023. Independent students:
☐ The student and/or spouse was employed in amount earned from each employer in 2023, a issue an IRS W-2 form. If more space is needed, attack	2023 and has listed below the names of and whether an IRS W-2 form is attached.	List every employer even if they did not
Employer's Name	2023 Amount Earned	IRS W-2 Attached?
Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Yes (example)
Note: If two parents were reported in Section B of this work parents. Check the box that applies (check only one):  Tax Filers:  The parent(s) has filed taxes and will provide FASFA on the web.  Non-tax Filers:  The parent(s) was not employed and had no is request and submit a verification of Non-Filing letter.  The parent(s) was employed in 2023 and has a from each employer in 2023, and whether an to the parent(s) by employers. List every employ filing from the IRS. If more space is needed, attach a	a 2023 tax return transcript or complete income earned from work in 2023. Parents from the IRS.  listed below the names of all the parent's IRS W-2 form is attached. Attach copie wer even if they did not issue an IRS W-2 form.	the IRS Data Retrieval Tool in  s included on FASFA will need to  employers, the amount earned s of all 2023 IRS W-2 forms issue  Also, please provide a statement of nor
Employer's Name	2023 Amount Earned	IRS W-2 Attached?
Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Yes (example)
Sign this Worksheet  Each person signing this worksheet certifies that all of the informust sign and date. WARNING: If you purposely give false or	_	_
both.		