

Student

University of New England Student Financial Services 2023-24 Standard Dependent Verification Worksheet

Your FAFSA has been selected for a process called "Verification," which means the information reported on it is compared with tax and income documentation for accuracy. If any discrepancies are found, our office will make corrections to your FAFSA. When completing this form, <u>use information from the parent(s)</u> you live with most (the parent listed on the FAFSA). We reserve the right to request additional information if any conflicting information is found during the review of these documents. For more information, please visit www.une.edu/verification. PLEASE thoroughly read and fully complete all six bullets.

1) P	rovide student inform	nation:					
					910		
	Last Name First Name			M.I.	PRN (Personal	PRN (Personal Reference Number-Student ID)	
	Physical Home Address (not a PO Box)				Dat	Date of Birth	
	City	State		Zip	Pho	one number	
2) Li	Yourself (UNE stOther people if t their support be	they live in the househol tween July 1, 2023 and J	(s) you live d and you une 30, 20	parents provide more to 24. Include the name of		continue to provide more than half of ember (excluding parents) who will be lege degree or certificate.	
	Full N	lame	Age	Relationship to you	College/University	Will be Enrolled at Least Half Time	
UNE	Student			Self	University of New England	Yes	
Fami	ily Member #1						
Fam	ily Member #2						
Fam	ily Member #3						
Fami	ily Member #4						
Fami	ily Member #5	rse side of this form for additi					
	*Note must p were not required to	: This is required <u>regardle</u> provide your tax return, pla p file a 2021 federal tax r	<u>ss</u> of wheth ease contac eturn and	ner or not the IRS Data Re ct our office to confirm. therefore did not, check		FAFSA. When in doubt whether or not you	
inciu					were \$		
	☐ I (parent) d	lid <u>not</u> file a 2021 federa	l tax returi	n and my total earnings v	vere \$		
	rovide copies of all 20 ecurity) during 2021.	021 W2s for student and	parent(s)	and statements from any	/ federal and/or state benefit pro	ograms you received (including social	
5) Ir	Indicate if parent(s) listed on this form received child support during 2021 considering all children living in the household (<i>check one</i>): YES: Indicate total amount received in 2021 for all children in household \$						
V	ign (<u>electronic/typed signatures are not acceptable</u>) to certify all information reported on this form is accurate and you agree to comply with all erification policies as stated by the University. Also, if additional documentation is requested due to conflicting information found during the verification rocess, you agree to submit the information needed to resolve the conflict.						

Parent

Date