

## 2021-2022 INDEPENDENT VERIFICATION WORKSHEET

<b>RETURN FORM TO:</b> <b>Murray State College</b> <b>1 Murray Campus</b> <b>Tishomingo, OK 73460</b> <b>FAX: 580-387-7229</b> <a href="mailto:financialaid@mscok.edu">financialaid@mscok.edu</a>	Last name:		First name:		M.I.
	Home Address: (Street)				
	(City, State and Zip)				
	Birthdate (MM/DD/YY):			Student ID #:	
	Phone number: (     )				

Your 2021-2022 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. Federal law says that before disbursing Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and your spouse (if married), whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to the financial aid office. We may ask for additional information, if necessary, for clarification. If you have questions about verification, contact the financial aid office as soon as possible so that your financial aid will not be delayed. If needed, MSC will submit corrections electronically to the Department of Education. Once you submit the requested documents, please do not make any corrections to your FAFSA unless you are instructed to do so by the MSC Financial Aid Office.

### B. Household Information

List the people that you will support between July 1, 2021 and June 30, 2022. Include:

- Yourself, your spouse, and your dependent children (if you provide more than half of the child’s support, or if they would be required to give your information when applying for federal aid). Include other people as part of your family only if they lived with you and received more than half of their support from you at the time you completed your student aid application **AND** will continue to get more than half of their support from July 1, 2021 through June 30, 2022.

Write the names of ALL household members. Also write in the name of the college for any family member who will be attending college, at least half-time between July 1, 2021 through June 30, 2022, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page with the student’s name and ID number at the top.

Full Name	Age	Relationship	University/College	Enrolled at least Half-time
John Smith (example)	26	SELF	Murray State	YES

**C. Income Information-** If you and/or your spouse did not use the IRS data retrieval option on the FAFSA, please submit a copy of yours and/or your spouse's Federal IRS Tax Return Transcript, which can be obtained from the IRS by calling 800-908-9946 or requesting it online at [www.irs.gov/individuals/get-transcript](http://www.irs.gov/individuals/get-transcript).

**Important Note:** If the student or parent(s) filed, or will file an Amended 2019 IRS tax return, please contact your financial aid administrator before completing this section.

**Student's Income Information-Please check one:**

\_\_\_\_\_ Student filed a 2019 Federal Income Tax Return (Continue to Student Signature).

\_\_\_\_\_ Student was not employed and had no income from work in 2019. **Must provide Verification of Non-Filing Letter from IRS.** (Continue to Student Signature)

\_\_\_\_\_ Student was employed in 2019 and did not file taxes, and is not required to file a tax return. **Please complete table below.** You are required to attach copies of all 2019 W-2 forms if not filing a federal tax return. List every employer even if they did not issue a W-2 form. **Must provide Verification of Non-Filing Letter from IRS.**

Student's Employer(s) or Source(s)	IRS W-2 Provided?	2019 Amount Earned
<i>(Example) ABC's Body Shop</i>	<i>Yes</i>	<i>\$2000</i>

*If more space is needed, please provide a separate page with the student's name and ID number at the top.*

**Spouse's Income Information-Please check one:**

\_\_\_\_\_ Spouse filed a 2019 Federal Income Tax Return (Continue to Spouse Signature).

\_\_\_\_\_ Spouse was not employed and had no income from work in 2019. **Independent Students ONLY must provide Verification of Non-Filing Letter from IRS.** (Continue to Spouse Signature)

\_\_\_\_\_ Spouse was employed in 2019 and did not file taxes, and is not required to file a tax return. **Please complete table below.** You are required to attach copies of all 2019 W-2 forms if not filing a federal tax return. List every employer even if they did not issue a W-2 form. **Independent students ONLY must provide Verification of Non-Filing Letter from IRS.**

Spouse's Employer(s) or Source(s)	IRS W-2 Provided?	2019 Amount Earned
<i>(Example) Dr. Bill Jones</i>	<i>Yes</i>	<i>\$500</i>

*If more space is needed, please provide a separate page with the student's name and ID number at the top.*

**Certifications and Signatures**

Each person signing below certifies that all of the information Reported is complete and correct.

**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

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Date