



## 2026-2027 Verification Worksheet – V5 Dependent Student

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Your 2026-2027 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states that before awarding 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 other required documents. If there are differences, your FAFSA information may need to be corrected.

You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form. We may request additional information.

### A. Tax and Income Information

#### **STUDENT (You MUST check one box below)**

- ☐ **YES, I filed a 2024 Federal Tax Return.** I have enclosed a copy of my 2024 IRS Tax Return Transcript or a signed copy of my 2024 Tax Return.
- ☐ **NO.** I did not file a 2024 Federal Income Tax Return. I have listed the sources and amounts of any earned income received in 2024 and enclosed copies of the W-2 form(s). List every employer even if the employer did not issue an IRS W-2 form.

Employer's Name	IRS W-2 or an Equivalent Document Provided?	Annual Amount Earned in 2024

- ☐ **NO.** I did NOT earn any income from wages in 2024.

#### **PARENT (You MUST check one box below)**

- ☐ **YES, I filed a 2024 Federal Tax Return.** I have enclosed a copy of my 2024 IRS Tax Return Transcript or a signed copy of my 2024 Tax Return.

**By completing this document, I certify that neither parent has filed nor is required to file a 2024 income tax return, and all their income earned from work, other income, and resources for the 2024 tax year are listed below.**

- ☐ I certify that neither parent was employed, and neither had income earned from work in 2024.
- ☐ One or both parents were employed in 2024 and have listed below the names of all employers, the amount earned from each employer in 2024, and whether an IRS W-2 form, or an equivalent document is provided. Provide all copies of 2024 W-2s or equivalent documents.

Employer's Name	IRS W-2 or an Equivalent Document Provided?	Annual Amount Earned in 2024
Total Amount of Income Earned from Work		\$

- ☐ One or both parents had other income and resources that supported the family for the 2024 tax year. [List each source of income in the table below. If more space is needed, provide a separate page with your name and ID number at the top.]

Source of Income	Annual Amount in 2024
Total Amount of Income	\$

#### **How to Obtain a Tax Return Transcript:**

To obtain a 2024 IRS Tax Return Transcript, go to [www.irs.gov/transcript](https://www.irs.gov/transcript). Make sure to request the **"IRS Tax Return Transcript"**.

If you are required to file a 2024 tax return and were granted a filing extension by the IRS beyond the six-month extension for tax year 2024, provide:

- A signed statement listing sources of any 2024 income and the amount of income from each source.
- Copy of the IRS's approval of an extension beyond the automatic six-month extension for tax year 2024;
- A copy of IRS W-2 for each source of employment income received or an equivalent document for tax year 2024; and
- If self-employed, a signed statement certifying the amount of the individual's adjusted gross income (AGI), and the U.S. income tax paid for 2024.

## B. Family Information

Family Size – Please list the following:

- **The student**
- **The student's parents** (even if the student is not living with them: such as a parent on active duty in US Armed Forces even if they are apart from the family). Exclude a parent that is deceased or is not living in the household because of separation or divorce.
- **Student's siblings** – They live with the student's parents (or live apart because of college enrollment), they receive more than half support from the student's parents and will continue to receive more than half their support from the student's parent from July 1, 2026 – June 30, 2027.
- **Other persons** – If they live with the student's parents and they receive more than half support from the student's parents and will continue to receive more than half their support from the student's parent from July 1, 2026 – June 30, 2027.

The family size should align with whom the parent could claim as a dependent on a U.S. tax return if the parent were to file a U.S. tax return at the time of completing the 2026-2027 FAFSA.

Full Name	Age	Relationship
		<i>Self</i>

## C. Certification and Signatures

Each person signing this worksheet certifies that all the information is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date this worksheet. **Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Custodial Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*Electronic signatures are not acceptable.**

## Verification of Identity

**Instructions:** You must complete the Identity Verification in front of a member of the Elizabethtown College Office of Financial Aid or a Notary. If you choose to complete these sections in front of a Notary, please contact our office for the necessary form.

To complete identity verification, a student must present an unexpired, valid, government-issued photo identification such as a U.S. passport, a driver's license, or other state-issued ID.

The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

**DO NOT complete this section without a member of the Financial Aid Staff present.**

## Verification Tracking (To be Completed at the Institution)

- ☐ The student appeared in person and presented acceptable identification to an institutionally authorized individual.
- ☐ The student was unable to appear in-person and provided the institution with a copy of the acceptable identification presented to a notary and a signed notary statement.

## Certification and Signatures

Each person signing below certifies that all the verification documents submitted with this certification are complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Print Student's Name: \_\_\_\_\_ Student's ID #: \_\_\_\_\_

Student's Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

**WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.**

**Please return completed forms to:**

**Office of Financial Aid  
Elizabethtown College  
One Alpha Drive  
Elizabethtown, PA 17022**

If you have questions about verification, please contact our office with any questions at 717-361-1404 or email us at [finaid@etown.edu](mailto:finaid@etown.edu)