



2024–25 Verification Worksheet

PLEASE COMPLETE AND ATTACH ALL OF THE REQUESTED INFORMATION

I. Student Information

Last Name	First Name	Student ID	
Street Address	City	State	Zip
() -			
Student's Phone Number	Student's Email Address	Best Way to Contact (Check One)	
		<input type="checkbox"/> Phone	<input type="checkbox"/> Email
() -			
Parent's Phone Number	Parent's Email Address	Best Way to Contact (Check One)	
		<input type="checkbox"/> Phone	<input type="checkbox"/> Email

II. Family Size

COMPLETE THE CHART BELOW BASED ON YOUR DEPENDENCY STATUS

To determine your dependency status, visit: cedarville.edu/fafsaDependency

WHO IS INCLUDED IN FAMILY SIZE?

DEPENDENT Students	INDEPENDENT Students
<ul style="list-style-type: none"> • Yourself • Your parent and their spouse/partner even if you do not live with your parent(s) (exclude a separated/divorced parent not living in the household) <ul style="list-style-type: none"> • Your parent(s) other child(ren) if the following are true: <ul style="list-style-type: none"> • They live with your parent(s) or live apart because of college enrollment • They receive more than half of their financial support from your parent(s) • They will continue to receive more than half of their financial support from your parent(s) through June 30, 2025 • Other persons if the following are true: <ul style="list-style-type: none"> • They live with your parent(s) or live apart because of college enrollment • They receive more than half of their financial support from your parent(s) • They will continue to receive more than half of their financial support from your parent(s) through June 30, 2025 	<ul style="list-style-type: none"> • Yourself • Your spouse, if applicable • Your child(ren) if the following are true: <ul style="list-style-type: none"> • They live with you • They receive more than half of their financial support from you • They will continue to receive more than half of their financial support from you through June 30, 2025 • Other persons if the following are true: <ul style="list-style-type: none"> • They live with you • They receive more than half of their financial support from you • They will continue to receive more than half of their financial support from you through June 30, 2025

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

Full Name	Age	Relationship
		Student/Self

III. Student Tax and Income Information for 2022

CHECK ONE AND CONTINUE TO STEP 4

- I used the IRS Direct Data Exchange to transfer 2022 Federal Tax Return Information into my FAFSA
- I am attaching a copy of my 2022 Federal Tax Return Transcript₁
- I am attaching a signed₂ copy of my 2022 Form 1040 Federal Tax Return and all applicable schedules (1, 2, 3, and C)
- I was not required to file a 2022 Federal Tax Return. If I am an independent student, I have attached a signed₂ statement verifying my non-filing status.*
- I was not employed and had no income earned from work in 2022

*** If you were not required to file a 2022 Federal Tax Return, complete the chart below with any income earned from work in 2022. Submit copies of any W-2s issued by the employer. List every employer even if no W-2 was issued.**

Employer's Name	IRS W-2 Provided?	Annual Amount Earned in 2022
		\$
		\$
		\$

IV. Parent/Spouse Tax and Income Information for 2022 (If Applicable)

CHECK ONE AND CONTINUE TO STEP 5

- I used the IRS Direct Data Exchange to transfer 2022 Federal Tax Return Information into my FAFSA
- I am attaching a copy of my 2022 Federal Tax Return Transcript₁
- I am attaching a signed₂ copy of my 2022 Form 1040 Federal Tax Return and all applicable schedules (1, 2, 3, and C)
- I was not required to file a 2022 Federal Tax Return. I have attached a signed₂ statement verifying my non-filing status.*
- I was not employed and had no income earned from work in 2022

*** If you were not required to file a 2022 Federal Tax Return, complete the chart below with any income earned from work in 2022. Submit copies of any W-2s issued by the employer. List every employer even if no W-2 was issued.**

Employer's Name	IRS W-2 Provided?	Annual Amount Earned in 2022
		\$
		\$
		\$

V. Certification

By signing this worksheet, I certify all the information reported is complete and accurate.

Student Signature₂

Date

Parent/Spouse Signature₂ (If Applicable)

Date

VIII. Submission

Note: When submitting this document, and other requested documents, please use the online upload tool.

It is your responsibility to blacken out all personal identifying information if you send your document through the mail (all but last four digits of your Social Security number, bank account information, etc.).

Online: Go to mycu.cedarville.edu and search for "Financial Aid Upload Tool!"

Mail: Cedarville University Financial Aid
251 N. Main Street, Cedarville, OH 45314

If you filed a non-IRS Income Tax Return, a foreign tax return, an amended IRS Income Tax Return, were a victim of IRS Tax Related Identity Theft, or filed an extension, then other documentation may be accepted or required. Please contact the Financial Aid office for more information.

₁ To request a Federal Tax Return Transcript from the IRS, visit IRS.gov and click "Get your Tax Record" or "Get Transcript Online"

₂ Signatures must be "wet signatures" meaning signed with pen in hand



Identity and Statement of Educational Purpose

COMPLETE ONLY ONE OF THE BOLD SECTIONS AND RETURN BY DROPPING OFF IN PERSON OR MAILING TO
Cedarville University Financial Aid, 251 N. Main Street, Cedarville, OH 45314

Student's Last Name	First Name	M.I.	Student ID	Email Address
Street Address				() - Student's Cell Phone Number

Can You Appear in Person? YES.

The student must appear in person at Cedarville University Financial Aid Office to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The office will maintain a copy of the student's photo ID that is annotated by the office with the date it was received and reviewed, and the name of the official authorized to receive and review the student's ID.

In addition, **the student must sign, in the presence of a financial aid office official**, the Statement of Educational Purpose provided below.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I _____
Print Student's Name

am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Cedarville University for 2024–2025.

Student Signature Date

OFFICE USE ONLY

Made copy of ID and signed/dated it

Compared signature and person to ID

Signature of witness

Date

Can You Appear in Person? NO.

If the student is unable to appear in person at Cedarville University Financial Aid Office to verify his or her identity, the student must mail to the institution:

- A.** A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as, but not limited to, a driver's license, other state-issued ID, or passport (copy should be made by the notary and initialed and dated by the notary); AND
- B.** The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I _____
Print Student's Name

am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Cedarville University for 2024–2025.

Student Signature Date

Notary's Certificate of Acknowledgement

*(Notary signature/seal required if student is not providing information in person.
Notaries can often be found at local banks, credit unions, insurance agencies, or shipping stores.
Certification may vary by state.)*

State of _____ City/County of _____

On _____, before me, _____,
(Date) (Notary's name)

personally appeared, _____, and proved to me
(Printed name of signer)

on basis of satisfactory evidence of identification _____
(Type of unexpired government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(Notary signature) My commission expires on _____
(Date)

