

2024–2025 Verification Worksheet
Independent Student-Tracking Group V-5

I-V5

Your 2024-2025 Free Application for Federal Student Aid (FAFSA) has been selected by the Department of Education for a process called verification. Therefore, we are required to confirm the information reported on your FAFSA. To verify that you provided correct information, the Office of Financial Aid will compare your FAFSA with the information on this worksheet and any other required documents and make corrections as needed to the Federal Student Aid processor. Title IV awards will not be processed until all documents are verified. If you have questions about verification, please contact the Jackson College Office of Financial Aid at (517) 796-8410.

STEP 1: Independent Student’s Information

Student’s Last Name	Student’s First Name	Student’s M.I.	Student’s Jackson College ID Number
Student’s Street Address (Include Apt. #)			Student’s Date of Birth
City	State	Zip Code	Student’s Primary Phone # (Include Area Code)

STEP 2: Independent Student’s Family Information

List below the people in your household; include:

- Yourself and spouse, if applicable.
- Your and/or your spouse’s children if you and/or your spouse will provide more than half of the children’s support from July 1, 2024, through June 30, 2025.
- Other people if they now live with you **and** you provide more than half of that person’s support and will continue to do so through June 30, 2025.
- Any household member who will be enrolled, **at least half-time**, in a degree, diploma, or certificate program any time between July 1, 2024, and June 30, 2025.

Full Name	Age	Relationship
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>
		<i>Self</i>

Continue to **Step 3**

STEP 3: Income Information to be Verified:

JC Student ID #: _____

Must be completed, only check one option

Student	Spouse, if applicable
<input type="radio"/> Student filed taxes <input type="radio"/> Student had no income, did not file taxes <input type="radio"/> Student had income, did not file taxes: W-2's attached	<input type="radio"/> Spouse filed taxes <input type="radio"/> Spouse had no income, did not file taxes <input type="radio"/> Spouse had income, did not file taxes: W-2's attached.

**If married at time of completing this form please mark applicable spouse income information.*

❖ **Only complete this section if the student/spouse earned income but did not file a 2022 income tax return with the IRS.**

Please list below the names of **all** employers in 2022 and provide a W-2 for each.

Employer's Name	2022 Amount Earned	Student or Spouse Income
<i>Suzy's Auto Body Shop (example)</i>	<i>\$2,000.00 (example)</i>	<i>Student/Parent</i>

STEP 4: Choose **EITHER** Option 1 (sign with Jackson College employee) **OR** Option 2 (sign with notary):

Option 1: Identity/Statement of Educational Purpose

You must also bring the following (**original**) documentation so the Jackson College employees can make a copy.

SOURCE DOCUMENTATION	RECEIVED BY JC EMPLOYEE	JC EMPLOYEE INITIALS
Unexpired valid government-issued photo identification (ID), i.e., driver's license, state identification card, or passport.	<input type="checkbox"/> Yes	

I certify that I _____ 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 Jackson College for the 2024-2025 award year.

(Print Student's Name)

Student's Signature

Date

I verified the applicant's identity in person and received the above information directly from the applicant.

Option 2: Identity/Statement of Educational Purpose: JC Student ID # _____

(Must be Signed by Notary)

Original document with copy of a 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 must be submitted.

I certify that I _____ am the individual signing this Statement of Educational
(Print Student's Name)

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 Jackson College for the 2024-2025 award year.

Student's Signature (Required)_____
Date**Notary's Certificate of Acknowledgement**

State of _____ City/County of _____ on _____,
(Date)

before me, _____ personally appeared
(Notary's Name)

_____, and provided to me on basis of satisfactory
(Printed Name of Student)

evidence of identification _____ to be the above-named person who
(Type of government-issued ID provided)
signed the foregoing instrument.

WITNESS my hand and official seal _____
(seal) (Notary Signature)

My commission expires on _____
(Date)

Continue to Step 5:

STEP 5: Certification and Signatures:

JC Student ID #: _____

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

By signing this worksheet, you certify that all of the information reported on it is complete and correct.

Student's Signature: _____ Date _____

STEP 6: Submit Completed Documentation:

If notarized, please mail your completed form and copy of your State ID or driver's license to:

Jackson College Office of Financial Aid
2111 Emmons Road
Jackson, Michigan 49201