

2025–2026 Verification Worksheet Independent Student-Tracking Group V-5



Your 2025-2026 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. Eligible awards will not be processed until all documents are verified.

If you have questions about verification, please contact your Financial Aid Specialist or call (517) 796-8410.

	Step	1:	Inde	pendent	Studen	t's	Infor	matio
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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, 2025, through June 30, 2026.
- > 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, 2026.

Full Name	Age	Relationship
Missy Jones (example)	18	Sister
		Self

Continue to Step 3



Step 3: Income Information to be Verified	Step	3: Incom	e Information	to be	V	erified
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JC St	udent ID	#:	

Must be completed, only check one option

Student	Spouse, if applicable
O Student filed taxes	O Spouse filed taxes
O Student had no income, did not file taxes	O Spouse had no income, did not file taxes
O Student had income, did not file taxes: W-2's attached	O 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 2023 income
	tax return with the IRS.

Please list below the names of all employers in 2023 and provide a W-2 for each.

Employer's Name	2023 Amount Earned	Student or Spouse Income
Suzy's Auto Body Shop (example)	\$2,000.00 (example)	Student/Parent

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.

EMPLOYER	EMPLOYEE INITIALS
Unexpired valid government-issued photo identification (ID), i.e., driver's license, state identification card, or passport.	

I certify that I	am the individual signing this Statement of Educational
(Print Student's Name) Purpose and that the Federal student financial assistant and to pay the cost of attending Jackson College for the	ce I may receive will only be used for educational purposes e 2025-2026 award year.
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 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 2025-2026 award year. Student's Signature (Required) Date **Notary's Certificate of Acknowledgement** State of _____ On ____ on ____ (Notary's Name) personally appeared , 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 (Notary Signature) (seal) My commission expires on (Date)

Continue to Step 5:



Step 3. Cel tilleation and Signatures	Step 5	: Certification	and Signatures:
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Step 5: Certification and Signatures:	JC Student ID #:
	rmation on this worksheet, you may be fined, be sentenced or both.
By signing this worksheet, you certify that all of the info	rmation reported on it is complete and correct.
Student's Signature:	Date

Step 6: Submit Completed Documentation:

If notarized, please mail your original 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