

Southeastern Illinois College Financial Aid Office 3575 College Rd. Harrisburg, IL 62946

Phone: (618) 252-5400 Fax: (618) 252-3062

Email: fao@sic.edu

2023-2024

Standard Verification Form Independent

V1

Your application was selected for review in a process called 'Verification'. In this process, the Financial Aid Office will be comparing information from your FAFSA with your signed 2021 IRS Tax Transcript. The law authorizes us to ask you for this information before awarding federal aid. If there are differences between your application information and your financial documents, the Financial Aid Office may send corrections electronically to have your information reprocessed. Complete verification as soon as possible so your financial aid will not be delayed.

WHAT YOU WILL NEED: SIGNED 2021 Student's (and spouse's if applicable) IRS Tax Transcript (unless DRT is successfully used) and any accompanying W2's and/or Schedules 2023-2024 Independent Verification Worksheet (Must be signed) Proof of Illinois residency (if applicable) **Section A- Student Information** Last Name First Name M.I Student ID Number Address Date of Birth City Zip Code **Phone Number** State

Section B- Family Information

List the people that you will support between **July 1, 2023** and **June 30, 2024**. <u>Include yourself, your children, and others who live with you and for whom you provide more than half of their support.</u> Also, write the name of the college for anyone listed who will be attending at least half-time between **July 1, 2023** and **June 30, 2024**, and will be enrolled in a degree or certificate program. Use a separate page if needed.

Full Name	Age	Relationship	College
		Self	

Section C- Student's	Income Information			
Did you file a 2021 Federal	Tax Return? YES NO	If IRS Data Retu	rieval Tool was unsuccessful, attach IRS Tax Transcrip	
If no, did you receive a W-2	from any employer for 2021?	ES NO	If yes, attach W2's.	
Check here if you will no	ot file and are not required to file a 2021	U.S. Income Tax Ret	urn.	
Check here if self-emplo	yed.			
Income earned	d from work: Use the W-2 or other ear	nings statements (N	ION TAX FILERS ONLY)	
Employer			Amount	
		\$		
		\$		
Section D- Spouse's	Income Information			
Did your spouse file a 2021	Federal Tax Return? YES NO	If IRS Data Retrieva	l Tool was unsuccessful, attach IRS Tax Transcript	
If no, did spouse receive a W	V-2 from any employer for 2021? ☐ YE	ES NO If yes, at	ttach W2's.	
Check here if you will no	ot file and are not required to file a 2021	U.S. Income Tax Ret	urn.	
Check here if spouse is s	elf-employed.			
Income earned	d from work: Use the W-2 or other ear	nings statements (N	ON TAX FILERS ONLY)	
Employer			Amount	
		\$		
		\$		
Section E- Signature	S			
By signing this worksheet, w	ve certify that all the information reported	d to qualify for Federa	al Student Aid is complete and correct.	
Student	Date	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.		
Spouse (optional)	Date		• • • • • • • • • • • • • • • • • • • •	