

Southeastern Illinois College Financial Aid Office 3575 College Rd. Harrisburg, IL 62946 Phone: (618) 252-5400 Fax: (618) 252-3062 Email: <u>fao@sic.edu</u>

2025-2026 Aggregate Verification Form Independent

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 2023 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 2023 Student's (and spouse's if applicable) IRS Tax Transcript (unless FA-DDX is successfully used) and any accompanying W2's and/or Schedules

2025-2026 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      | State      | Zip Code | Phone Number      |  |

# **Section B- Family Information**

List the people that you will support between July 1, 2025 and June 30, 2026. <u>Include yourself, your children, and others who live</u> with you and for whom you provide more than half of their support during the award year. Also, write the name of the college for anyone listed who will be attending at least half-time between July 1, 2025 and June 30, 2026, and will be enrolled in a degree or certificate program. Use a separate page if needed.

| Full Name | Age | Relationship | College |
|-----------|-----|--------------|---------|
|           |     | Self         |         |
|           |     |              |         |
|           |     |              |         |
|           |     |              |         |
|           |     |              |         |
|           |     |              |         |
|           |     |              |         |

**V5** 

### Section C- Student's Income Information

| Did you file a 2023 Federal Tax Return? YES NO  | If FA-DDX Tool was unsuccessful, attach IRS Tax Transcript |                      |  |  |
|---|--|----------------------|--|--|
| If no, did you receive a W-2 or equivalent form from any employer for 2023?                 | YES NO   | If yes, attach W2's. |  |  |
| Check here if you will not file and are not required to file a 2023 U.S. Income Tax Return. |  |                      |  |  |
| Check here if self-employed.  |  |                      |  |  |
| Income earned from work: Use the W-2 or other earnings statements (NON TAX FILERS ONLY)     |  |                      |  |  |
| Employee  | Amou   | nt                   |  |  |
| Employer  | Anou   | lit                  |  |  |
| Employer  | \$   |                      |  |  |
|   |  |                      |  |  |
| Section D- Spouse's Income Information  | \$   |                      |  |  |

If no, did spouse receive a W-2 or equivalent from any employer for 2023?

Check here if you will not file and are not required to file a 2023 U.S. Income Tax Return.

Check here if spouse is self-employed.

| Income earned from work: Use the W-2 or other earnings statements (NON TAX FILERS ONLY) |        |  |
|---|--------|--|
| Employer  | Amount |  |
|   | \$     |  |
|   | \$     |  |

 $\square$  YES  $\square$  NO

If yes, attach W2's.

## Section E- Statement of Educational Purpose

#### To Be Signed at the Institution

The student must appear in person at <u>Southeastern Illinois College</u> 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 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.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

#### To Be Signed in the Presence of a Notary

If the student is unable to appear in person at Southeastern Illinois College to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; 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   | am the individual signing this Statement of Educational Purpose            |
|--|--|
| (print student's name)<br>and that the Federal student financial assistance I may<br>cost of attending Southeastern Illinois College for 202 | receive will only be used for educational purposes and to pay the 25-2026. |
| To be completed by Financial Aid Officer if submitting   | in person:   |
| Financial Aid Officer Name Printed   | Financial Aid Officer Title  |
| Financial Aid Officer Signature  | Date   |
| To be completed by a Notary Public if submitting by ma   | ail:   |
| Notary's Cert  | ificate of Acknowledgement   |
| State of   |  |
| City/County of   |  |
| On, before me,   | ,  |
| Date   | Notary's name  |
| personally appeared, Printed name of signer  | , and proved to me because of satisfactory                                 |
| evidence of identification   | to be the above-named person who signed                                    |
| the foregoing instrument.  |  |
| WITNESS my hand and official seal  | Notary signature   |
| (Seal)   | My commission expires on   |

## **Section F- Signatures**

By signing this worksheet, we certify that all the information reported to qualify for Federal 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)