

Dear Student: Complete **ONLY** the section(s) that correspond with the verification codes selected above.

PLEASE READ: The purpose of this communication is to request information pertaining to your 2026-2027 Free Application for Federal Student Aid (FAFSA), in order to establish the accuracy of information that you reported. Your FAFSA was selected for review by the U.S. Department of Education for a process called "Verification." In order to offer you any Federal Student Aid, we are required to ensure that you provide documentation, via this Worksheet, for certain information that you reported on your FAFSA. Both sets of information, FAFSA and Worksheet, will be verified for accuracy. Resulting discrepancies will require you to provide additional documentation. Unresolved discrepancies may result in revision to your FAFSA. Please **sign** and **return** the Worksheet with the requested documents to **the Financial Aid Office, within two weeks**. We encourage you to contact us by email or phone, if you have questions about this request, so that we can finalize your 2026-2027 Financial Aid Offer. **We look forward to having you as a member of our Eastern Warrior Family!**

STUDENT INFORMATION (V1, V4, V5)

Student's Name: _____
Last First MI Eastern ID Number

Address _____
Street Address Apt. # City State Zip Code

Date of Birth _____ Email Address _____

Cell Phone Number _____ Alternate/Home-Phone Number _____
(Including area code) (Including area code)

STUDENT DEPENDENT/INDEPENDENT STATUS (V1, V5)

Select which status you hold (dependent or independent) and list below all the people in your household. If any household member(s) are enrolled at least half-time in a degree, diploma, or certificate program at a post-secondary educational institution (between July 1, 2026 and June 30, 2027), include the name of the institution. *If additional space is required, attach a separate page that includes your name and student ID/SSN at the top.* **NOTE:** "Parent(s)" (as described below) include: Parent(s), guardian(s), and stepparent(s).

- ☐ **DEPENDENT:** List the people living in your parent(s) household, including:
- Yourself and your parent(s), even if you don't reside with your parent; and
 - Your parent(s)' other children (even if they do not live with your parents), if (a) your parent(s) will provide more than half of their financial support from July 1, 2026 and June 30, 2027, (b) or if the other children would be required to provide their parental information, if they were completing a FAFSA for 2026-2027. Include children who meet either of these standards, even if they do not reside with your parent(s); and
 - Other people who reside with your parent(s), if your parent(s) provide more than half their financial support and will continue to provide them more than half of their financial support from July 1, 2026 through June 30, 2027.

- ☐ **INDEPENDENT:** List the people living in your household, including:
- Yourself and your spouse (if married); and
 - Your children, if you will provide more than half of their financial support from July 1, 2026 through June 30, 2027; or if your children would be required to provide parental information if they were completing a FAFSA for 2026-2027. Include children who meet either of these standards, even if they do not reside with you; and
 - Other people who reside with you, if you will provide them more than half of their financial support from July 1, 2026 through June 30, 2027.

NAMES of People Living in Household	AGE(s)	RELATIONSHIP TO YOU	INSTITUTION NAME	Will be enrolled at least half time in institution	
		SELF	Eastern CT State University	<input type="checkbox"/> Yes	<input type="checkbox"/> No

*Proof of financial support may be requested

Student's Name: _____

Student ID Number _____

INCOME VERIFICATION (V1, V5)

A. INCOME TAX RETURN FILERS – Important Note: If the student (or parent, if dependent) filed, or will file, an amended 2024 IRS Tax Return, you must contact your Financial Aid Administrator before completing this section.

Instructions: Complete this section if you, the student (or parent, if dependent), filed, or will file, a 2024 income tax return(s). *The best way to verify income is by using the IRS Data Exchange Tool (DDX) that is part of the FAFSA on the Web. If you have not already used the tool, go to www.FAFSA.ed.gov to log in to your FAFSA record, select "Make FAFSA Corrections," and navigate to the Financial Information section of the form. From there, follow the instructions to determine if you are eligible to use the IRS Data Exchange Tool (DDX) to transfer 2024 IRS income tax information into your FAFSA. It may take up to two (2) weeks for the IRS income information to be available through the IRS Data Exchange Tool (DDX) for electronic IRS tax return filers, and up to eight (8) weeks for paper IRS tax return filers. If you need more information about when, or how, to use the IRS Data Exchange Tool (DDX), please see your Financial Aid Administrator. Check the appropriate box(es) below:*

☐ **DEPENDENT:** (Check one of the following that applies to you)

- ☐ The student's parent(s) have used the IRS Data Exchange Tool (MX) on the FAFSA Website to transfer 2024 IRS income tax information into the student's FAFSA.
- ☐ The student's parent(s) are unable to or choose not to use the IRS Data Exchange Tool (DDX), and the parent(s) will provide the school a copy of the 2024 income tax return transcript(s). ***If the parents are married and filing separate 2024 income tax returns, transcripts must be submitted for each parent.***

☐ **INDEPENDENT:** (Check one of the following that applies to you)

- ☐ I, the student, have used the IRS Data Retrieval Tool on the FAFSA Website to transfer 2024 IRS income tax information into my FAFSA.
- ☐ I, the student, am unable to or choose not to use the IRS Data Exchange Tool (DDX), and instead will provide the school a copy of the 2024 income tax return transcript(s). ***If I am married and my spouse and I are filing separate 2024 income tax returns, transcripts must be submitted for both my spouse and me.***

To obtain an IRS Income Tax Return Transcript, go to www.irs.gov and click on the "Get Your Tax Record" link, or call the IRS toll-free number at **1-800-829-1040**. Be sure to request the "IRS Tax Return Transcript" and not the "IRS Tax Account Transcript." You will be required to provide your Social Security Number, date of birth, and the address on file with the IRS (the address used on the 2024 Income Tax Return).

B. INCOME TAX RETURN NON-FILERS

Instructions: Complete this section if you, the student (and spouse, if married), or parent(s) (if you are a dependent) will not file and is/are not required to file a 2024 income tax return with the IRS. Check the appropriate box below:

- ☐ The student (and spouse, if married), or parent(s) was/were not employed and had no income from employment in 2024
- ☐ Student (and/or spouse, if married), or parent(s) was/were employed in 2024 and is providing the pertinent information in the table (below). Please attach copies of corresponding W-2 forms issued to you (and your spouse, if married), or your parent(s) employer(s). Also, list ever employer, even if the employer did not issue W-2 forms. ***If additional space is required, attach a separate page that includes your name and student ID/SSN at the top.***

STUDENT – Employer's Name(s)	Annual Amount Earned in 2024	IRS W-2(s) Attached	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No

PARENT – Employer's Name(s)	Annual Amount Earned in 2024	IRS W-2(s) Attached	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No

NOTE: Eastern Connecticut State University may require you to provide documentation from the IRS that indicates that a 2024 IRS Income Tax Return was not filed.

Student's Name: _____

Student ID Number _____

HIGH SCHOOL COMPLETION STATUS (V4, V5)

Provide **one** of the following documents that indicate the student's high school completion. Check the appropriate box below:

- ☐ I am providing a copy of my high school diploma (or home school/GED completion documentation, if applicable).
- ☐ I am providing a copy of my final official high school transcript that includes the date when my diploma was awarded.
- ☐ I am providing a state-issued certificate or transcript following my completion of a state-authorized examination (GED test, HiSET, TASC, or other state-authorized examination) that is recognized in the State of CT as the equivalent of a high school diploma.
- ☐ I am providing a copy of a state-issued credential indicating that I was a home-schooled student and have completed the requirements of completion in a home-schooled setting under the laws of the State of CT (other than a high school diploma or its recognized equivalent).
- ☐ I was home-schooled in a state where state law does not require state-issued credentials. Therefore, I am providing a transcript (or the equivalent) listing the secondary school courses that I have completed in a home-schooled setting, and a statement, signed by my parent/guardian, that I have successfully completed the requirements of completion under the laws of the State of CT (other than a high school diploma or its recognized equivalent).
- ☐ I am providing a copy of my 'secondary school leaving certificate' indicating that I completed my secondary education requirement in a foreign country.

NOTE: If the student is unable to provide the documentation listed above, please see your contact the Financial Aid Office.

Certification and Signatures

Each person signing below certifies that all the information reported is complete and correct. **If dependent, the student and at least one parent must sign and date.**

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

Student Signature

Date

Parent or Spouse Signature

Date