2026-2027 VERIFICATION
DEPENDENT STUDENT

STUDENT INFORMATION

_____ _____ _____
First Name   M.I.   Last Name

_____ **OR** _____   (_____) - _____ FC26DSIW
Student ID   Last 4 Digits of SSN   Phone Number

STUDENT INCOME FROM WORK (DEPENDENT STUDENT)

You must confirm that you have not filed and **are not required to file** a 2024 income tax return by checking the appropriate box below.

I have not filed and am not required to file a 2024 income tax return. I had no income earned from work in 2024.

I have not filed and am not required to file a 2024 income tax return. I have listed below the names of all employers, the amount earned from each employer in 2024, and whether an IRS W-2 form or an equivalent document is provided. I have listed every employer even if the employer did not issue an IRS W-2 form.

✦ *Attach copies of all 2024 IRS W-2 Forms issued to you.*

EMPLOYER'S NAME	IRS W-2 OR EQUIVALENT PROVIDED?	ANNUAL AMOUNT EARNED IN 2024
		$
		$
		$
		$
		$

If more space is needed, provide a separate page with the student name and ID number at the top.

CERTIFICATIONS AND SIGNATURES

By signing below, I certify that all the information is complete and correct.

WARNING: *If you purposely give false or misleading information, you may be fined, sent to prison, or both.*

_____   _____
Student Signature*   Date

_____   _____
Parent Signature*   Date

* Must be an actual "wet" signature. A digital signature or typed font signature is not acceptable. This form may be completed and "wet" signed via a tablet or smartphone with PDF signing capability using a stylus pen. You may need to download an app to access this feature.

Mail, fax, email, or deliver the completed worksheet to the financial aid office using the contact information listed below.
— EMAILED FORMS MUST BE SENT FROM THE IWU STUDENT EMAIL ACCOUNT —