(Continued on next page) \rightarrow

Concordia University

2025-2026 Verification Worksheet 5

Your Free Application for Federal Student Aid (FAFSA) was selected for a review process called "verification." In this process the Financial Aid Office will compare information you entered on your FAFSA with the information you submit on this form. Please complete verification within **two weeks** of receiving the notification that you have been selected for verification. *Your financial aid will not be determined until all verification requirements are completed.* If the requested documentation is not returned before the end of the term, you **WILL NOT** be eligible for Federal, State, or Institutional aid.

What to do:

- 1. Complete sections 1-3. Make sure to read all instructions as errors can delay the processing of your financial aid. **Leaving questions unanswered WILL result in an incomplete and returned form.** You may need to answer "0" or "N/A" for some questions.
- 2. Make arrangements to sign the Verification Worksheet in front of a Concordia Financial Aid Administrator. This requires having an unexpired, valid, government-issued photo ID with you at the time of signing. IF YOU ARE UNABLE TO APPEAR IN PERSON AT CONCORDIA UNIVERSITY, YOU WILL NEED TO MAKE ARRANGEMENTS TO SIGN THE VERIFICATION WORKSHEET AND THE APPENDIX A IN FRONT OF A NOTARY OR COMPLETE A VIDEO CALL WITH A FINANCIAL AID ADMINISTRATOR.
- 3. Mail the completed verification worksheet to the Concordia University Financial Aid Office. YOU MUST SUBMIT THE ORIGINAL VERIFICATION WORKSHEET FAXES OR EMAILS WILL NOT BE ACCEPTED.

Name:	Student ID Nu	ımber: F00
Address:		
City, State, Zip:	Phone Number	pr:
ection 2. Family Information		
arents. Dependent students should list: 1) Ther actudes other persons who are supported at least	t 50% and live in the househ	old. If you need more space please attach a
eparate page. Independent students should list t	their spouse and their depen	dent children.
eparate page. Independent students should list to Full Name	Age Age	Relationship
		Relationship
eparate page. Independent students should list to Full Name		Relationship

Student Name:	Student ID:F00	<u> </u>
Section 3a. Tax Forms and Inco	ne Information: Student	
STUDENT:		
□ Yes , I did file a 2023 Feder OR	al Tax Return and utilized the Direct Da	ata Exchange Tool on my FAFSA. If yes, continue with section 4b.
	_	023 IRS Tax Return Transcript(s) OR a signed copy of the 2023
□ No , I did not file a 2023 Fe	deral Tax Return (if no, continue below.))
ALL Students:		
o Total income	earned in 2023 \$	(If no income earned, please enter "0")
		ments. If more space is needed, provide a separate page with the
	at the top of the page.	1 1 1 5
ONLY Independent Stud	lents:	
	ē	fter 10-1-2024. If you are unable to provide the IRS documentation,
please submit the Ve	erification of Non-filing Letter found on	Concordia's website.
Section 3b. Tax Forms and Inco	me Information: Parent	
DADENIE		
PARENT:		
section 4.	ederal Tax Return and utilized the Direct	t Data Exchange Tool on my student's FAFSA. If yes, proceed to
OR		
	_	023 IRS Tax Return Transcript(s) OR a signed copy of the 2023
Federal Income Tax Return	and applicable schedules.	
□ No , neither parent filed a 20	023 Federal Tax Return.	
•	nd am not required to file a 2023 income	e tax return. If no, please remain in Section 3 and continue reviewing
ONLY Dependent Stude	*	
		(If no income earned, please enter "0")
o Source:		
	23 W-2 forms and other earning states at the top of the page.	ments. If more space is needed, provide a separate page with the
AND		
	Verification of Non-filing Letter dated or	n/after 10-1-2024. If you are unable to provide the IRS documentation,
	erification of Non-filing Letter dated of	•

(Continued on next page) →

Concordia University	2
Student Name:	

2025-2026 Verification Worksheet 5

Student Name:	Student ID:F	00	
Section 4. Certification			
	_	bove is complete and true to the best of my (our) knowledge and ACCEPTED – WET SIGNATURES ONLY.)	belief.
Student's Signature:		Date:	
Parent's Signature: (Dependent Student's only)		Date:	
Attach copy of <u>unexpired</u> , valid, go	vernment-issued photo ID)	
Office use only Verification of signature for Statement of	Educational Purpose and veri	ification of match to government issued photo ID.	
Financial Aid Administrator	(printed)	Date	
Financial Aid Administrator	(signature)		