

2022-2023 Institutional Verification Document

Your 2022–2023 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and your spouse (if applicable), must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to our office. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

| Student's Last Name | First Name . | Student's SMC ID Number | |
|---------------------------------|------------------------|--|--|
| Student's Street Address (inclu | de apt. no.) | Student's Date of Birth | |
| City State Zip Code | | Student's Email Address | |
| Student's Home Phone Numbe | er (include area code) | Student's Alternate or Cell Phone Number | |

B. List below the people in the student's household. Include:

- The student.
- The student's spouse, if the student is married.

A. Independent Student's Information

- The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2022, through June 30, 2023, even if a child does not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2023.

Number in College: Include in the table below, information about any household member who is, or will be, <u>enrolled at least half time</u> in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2022, and June 30, 2023, and include the name of the college.

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

| Full Name | Age | Relationship | College | Will be Enrolled at Least Half Time (Yes or No) |
|-----------|-----|--------------|---------|---|
| | | Self | | |
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Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

| Each person signing this worksheet certifies that all of the information reported on it is completed and correct. | | | | |
|---|--------|--|--|--|
| Student's Name (please print) | SMC ID | | | |
| Student's Signature (Required) | Date | | | |
| Spouse's Signature (Optional) | Date | | | |

C. Certification and Signatures

Submit this worksheet to the Saint Mary's College Financial Aid Office