



2024-2025 Independent Verification Worksheet

Your 2024-2025 Free Application for Federal Student Aid (FAFSA) was selected for verification. You must confirm the information you reported on your FAFSA. You must complete and sign this institutional verification worksheet, attach any required documents, and submit the completed form to the Financial Aid Office. Contact us immediately with questions to prevent your financial aid being delayed.

A. Student Information

Last Name	First Name	M.I.	Student ID		
Address (Include ap	t. no.)		Date of Birth		
City	State	Zip	Phone Number (include area code)		
B. Family Size					
List below the peo	ople in the family. Includes	the following:			

- The student (you).
- The student's spouse, if the student is married.
- The student's dependent children if the following are true:
 - They live with the student (or live apart because of college enrollment);
 - They receive more than half of their support from the student; and
 - They will continue to receive more than half their support from the student during the award year.

• Other persons if the following are true:

- They live with the student;
- o They receive more than half of their support from the student; and
- They will continue to receive more than half their support from the student during the award year.

The provided criteria for "dependent children" or "other persons" align with the requirement that family size align with whom the student could claim as a dependent on a U.S. tax return if the student were to file a U.S. tax return at the time of completing the 2024-2025 FAFSA. As a result, the student should not include any unborn children in the family size.

If more space is needed, use the back of this form or provide a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship	Full Name	Age	Relationship
Martha Jones (example)	28	Self			
		Self			

C. Certification and Signature

- Each person signing below certifies that all of the information reported is complete and correct.
- **WARNING**: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Student's Signature (Required – Typed signatures not accepted) Date

Spouse's Signature (Optional – Typed signatures not accepted) Date

Lewis-Clark State College is an Equal Opportunity Provider, all forms are available in alternative formats to assist persons with disabilities. Please give reasonable notice to the Financial Aid Office. TTY 711 or https://www.sorenson.com/video/relay/