

Your application for federal aid, the Free Application for Federal Student Aid (FAFSA), has been selected by the U.S. Department of Education for the verification process (34 CFR, Part 668). In this process, SUNY Adirondack will verify information on this worksheet, your family's 2020 federal tax information, and any other required documents. If there are differences between your application and the documents you submit, then corrections may be made. You will receive acknowledgment of these changes from Federal Student Aid.

Section A: Student Information

Last Name	First Name	MI	Social Security Number	
Address (include apt. #)		City	State	Zip Code
Date of Birth	Email Address		Phone Number	

Section B: Family Information

Independent Students List the people in your household, including:

- Yourself
- Your spouse (if you are married)
- Your children or other individuals (if applicable) for whom you currently provide and will continue to provide more than half of the financial support for from July 1, 2022 through June 30, 2023.

Dependent Students List the people in your household, including:

- Yourself
- Your parent(s), including stepparent if applicable
- Any children or individuals for whom your parent(s) currently provide and will continue to provide more than half of the financial support for from July 1, 2022 through June 30, 2023

<u>Full Name</u>	<u>Age</u>	<u>Relationship</u>	<u>Current College (2022-23)</u>
_____	_____	<i>self</i>	<i>SUNY Adirondack</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Attach list of additional household members, if needed

Please return completed and signed form to the Financial Aid Office:
 By mail: SUNY Adirondack ATTN: Financial Aid Office, 640 Bay Road, Queensbury, NY 12804
 By email: finaidoffice@sunyacc.edu
 By fax: 518.743.2314

Section C: Income and Federal Tax Information

Student/Spouse information: Please check ONE box:

- The student/spouse used the IRS Data Retrieval Tool to transfer their 2020 IRS Income Tax Return information into the student's FAFSA.
- The student/spouse attached either IRS Tax Return Transcript or a signed copy of their 2020 IRS Income Tax Return to this worksheet.
- The student/spouse was/were employed in 2020, but will not file and was not required to file a 2020 IRS Income Tax Return. Copies of all 2020 W-2s are attached. Select one:
 - Verification of non-filing document for 2020 from IRS is attached (one for each student and spouse, if married)
 - I/We have been unable to obtain verification of non-filing from the IRS at this time. ____ (initial here) ____ (spouse initial here)
- The student/spouse had no income, will not file, and was not required to file, a 2020 IRS Income Tax Return. Select one:
 - Verification of non-filing document for 2020 from IRS is attached (one for each student and spouse, if married)
 - I/We have been unable to obtain verification of non-filing from the IRS at this time. ____ (initial here) ____ (spouse initial here)

Parent/Step-parent information: Please check ONE box:

- Your parent(s) used the IRS Data Retrieval Tool to transfer their 2020 IRS Income Tax Return information into the student's FAFSA.
- Your parent(s) attached either IRS Tax Return Transcript or a signed copy of their 2020 IRS Income Tax Return to this worksheet.
- Your parent(s) was/were employed in 2020, but will not file and was not required to file a 2020 IRS Income Tax Return. Copies of all 2020 W-2s are attached. Select one:
 - Verification of non-filing document from 2020 from IRS is attached (one for each parent in household)
 - I have been unable to obtain verification of non-filing from the IRS at this time. ____ (parent 1 initial here)____ (parent 2 here)
- Your parents(s) had no income, will not file, and was not required to file, a 2020 IRS Income Tax Return. Select one:
 - Verification of non-filing document from 2020 from IRS is attached (one for each parent in household)
 - I have been unable to obtain verification of non-filing from the IRS at this time. ____ (parent 1 initial here)____ (parent 2 here)

Section D: Verification of Other Untaxed Income ****DO NOT LEAVE BLANK****

Calendar Year 2020	Student/Spouse	Parent(s)/Stepparent
Payments to tax-deferred pension and savings plans including, but not limited to, amounts reported on the W-2 boxes 12a through 12d codes D, E, F, G, H & S (do NOT include code C or code DD).....	_____	_____
Child support <i>received</i> for children (Exclude foster care/adoption payments).....	_____	_____
Other Untaxed Income: Type: _____(i.e., Workers Comp, disability), including money received or paid on your behalf (i.e. bills) not reported elsewhere DO NOT include the following: extended foster care benefits, student aid, welfare payments, untaxed Social Security, SSI, or foreign income exclusion.....	_____	_____

Section E: Signature Certification

By signing this worksheet, I/we certify that all the information reported on this worksheet is complete and correct. If dependent, at least one parent must sign. Warning: Pursuant to federal law, if you purposely give false information on this worksheet you may be fined, sentenced to jail, or both.

Date _____ Date _____

Student's Signature _____ Parent's Signature (Dependent Students Only) _____