

2023–2024 Independent Verification V5

Your 2023–2024 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, the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

Δ	Stud	ent's	Inforn	nation
_				

Student's Last Name	Student's First Name	Student's M.I.	Student's ID Number
Student's Street Addre	ess (include apt. no.)	Student's Date of Birth	
City	State	Zip Code	Student's Email Address
Student's Home Phon	e Number (include area code		Student's Alt or Cell Phone Number

B. Student's Family Information

List below the people in your household. **Include:**

- Yourself and your spouse if you are married.
- <u>Your children</u> if you or your spouse will provide more than half of their support from July 1, 2023, through June 30, 2024, even if they do not live with you. Do not include foster children.
- Other people if they now live with you and the student or spouse provides more than half of their support and will continue to provide more than half of their support through June 30, 2024.

Full Name	Age	Relationship	College*	Will be enrolled at least Half-Time
Missy Jones (example)	18	Sister	USA University	Yes

*Include the name of the college for any household member who will be enrolled, at least half-time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2023, and June 30, 2024. If more space is needed, attach a separate page with the student's name and ID# at the top.

C. Student Income Information		
• NOTE: The instructions below apply to the student and office if the student or spouse filed separate IRS income tax return 2021 tax year on December 31, 2021.	=	-
Check the box that applies:		
The <u>student/spouse has filed</u> a 2021 IRS Income Tax Return AND <u>has</u> income tax return information into the student's FAFSA.	as used the IRS DRT in FAFSA o	n the Web to transfer 20201IRS
The <u>student/spouse has filed</u> a 2021 IRS Income Tax Return AND the use the tool to transfer 2021 IRS income tax return information into been filed.		
The <u>student/spouse has filed</u> a 2021 IRS Income Tax Return, BUT <i>Web</i> , and instead will provide the school a 2021 IRS Tax Return T		
 A 2021 IRS Tax Transcript may be obtained through: Online Request - Go to www.IRS.gov, under the Too Transcript by Mail." Click "Get Transcript by MAIL and NOT the "IRS Tax Account Transcript." Telephone Request - 1-800-908-9946 Paper Request Form - IRS Form 4506T-EZ or IRS F 	"Make sure to request the "I	
Check here if a 2021 IRS Tax Return Transcript is provide	led.	
Check here if a 2021 IRS Tax Return Transcript will be is received in our office).	provided later (verification canno	ot be completed until this form
The student/spouse did not file a 2021 IRS Income Tax Return, was	s not employed and had no incom	ne earned from work in 2021.
The student/spouse did not file a 2021 IRS Income Tax Return, and List below the names of all employers, the amount earned from each List every employer even if the employer did not issue an IRS W If more space is needed, provide a separate page with the student Provide copies of all 2021 IRS W-2 forms issued to the student	ch employer in 2021, and whether-2 form. 's name and ID number at the top	•
Employer's Name	2021 Amount Earned	IRS W-2 Attached?
Suzy's Auto Body Shop (example)	\$2,000.00	Yes

Student's Name: ______ ID#: _____

Student's Nan	ne:		ID#:		
	ents <i>unable</i> to present for ersity:	m and ID in pers	son at Columbia International		
Identity	and Statement of Educa	tional Purpose (<u>T</u>	To Be Signed with Notary)		
If the student is must provide:	s <u>unable</u> to appear in person at <u>Co</u>	lumbia International U	niversity to verify his or her identity, the student		
	the valid government-issued photo t not limited to a driver's license,		at is acknowledged in the notary statement below, or passport; and		
(b) The origina	al notarized Statement of Education	onal Purpose provided l	below.		
	Statem	ent of Education	al Purpose		
I certif	I certify that I am the individual signing this Statement of Educational (Print Student's Name)				
Purpos	se and that the federal student fina	ncial assistance I may 1	receive will only be used for educational purposes		
and to	pay the cost of attending Columb	a International Univers	sity for 2023-2024.		
(Studen	nt's Signature)	(Date)	(Student's ID Number)		
	·	ertificate of Ack			
State of					
City/County of	Ī				
On	, before me,	(Notary's name)	, personally appeared,		
			o me on basis of satisfactory evidence of		
	(Printed name of s	igner)	·		
identification _	(Type of government-issued photo		e above-named person who signed the foregoing t.		
WITNESS my	v hand and official seal				
			(Notary signature)		
	(seal)	My commission	on expires on		
			(Date)		

E. For students able to present form and ID in person at Columbia International **University:**

Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person in the Financial Aid Office at Columbia International University to verify his or her identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student's ID.

In addition, the student must sign, *in the presence of the institutional official*, the following:

Statement of Ed	lucational Purpose		
I certify that I(Print Student's Name)	_ am the individual signing this Statement of Educational		
Purpose and that the federal student financial assista	ance I may receive will only be used for educational purposes		
and to pay the cost of attending Columbia Internation	onal University for 2023-2024.		
(Student's Signature) (D	ate) (Student's ID Number)		
F. Certification and Signatures			
Each person signing this worksheet certifies that all of the information reported on it is complete and correct.	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.		
Print Student's Name	Student's ID Number		
Student's Signature	Date		
Spouse's Signature (Optional)	Date		

Submit completed form and any additional documents to: Columbia International University, Financial Aid Office 7435 Monticello Road, Columbia, SC 29203

Office: (803) 807-5036 Fax: (803) 223-2505 Email: finaid@ciu.edu

Office Use Only:			ID Results Entered
Rec'd/ by	Verified/	Verified by	by