

PO Box 770 Georgetown, TX 78627

Phone: (512) 863-1259 Fax: (512) 863-1507

Dependent Aggregate Verification Worksheet

Your 2025-2026 Free Application for Federal Student Aid (FAFSA) has been selected for a process called verification. Please submit this form with all required documentation to the Financial Aid Office. Southwestern University will confirm that the information reported on your 2025-2026 FAFSA is accurate. Any discrepancies will be corrected by the Financial Aid Office based on the information provided on this document. More information about Verification may be found on our <u>Verification FAQ's Page</u>.

Α.	Student Information (please print)			
	Last Name	First Name, Middle Initial	SU ID#	
	Street Address	City, State, Zip	Home/Cell Number (area code)	
В.	Parent Information (please print)			
	Last Name	First Name, Middle Initial	Home/Cell Phone Number (area code)	

C. Family Information (please print)

List the people in your parents' family including:

- Yourself (student)
- Your parent(s), including step-parent(s), if your custodial parent is remarried, even if you do not live with your parents
- Your parent's other child(ren), even if they don't live with your parents, <u>ONLY IF</u> (a) your parents will provide more than half of their support from 7/1/2025 through 6/30/2026, or (b) the child(ren) would be required to provide parental information when applying for Federal Student Aid during the 2025-26 academic year.
- Other people ONLY IF (a) they live with your parents, (b) your parents provide more than half of their support, AND (c) your parents will continue to provide more than half of their support from 7/1/2025 through 6/30/2026.
- In addition, include the name of the college, for any household member, <u>EXCLUDING PARENT(S)</u>, who will be attending college at least half-time in a degree, diploma or certificate program between 7/1/2025 and 6/30/2026.

If you need more space, attach a separate sheet.

*If your parents are divorced, **DO NOT** include your parent non-record, or his/her family members.

FULL NAME	AGE	RELATIONSHIP TO STUDENT	COLLEGE
		Me (Student)	Southwestern University
		Parent 1	
		Parent 2	

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`	Student	Tax Forms	χ,	Income

Did	you (student) file a 2023	3 U.S. Federal Tax Ret	urn? Please check one	e box below. Do not l	leave any sections blank.	If none, list
"0"	or "NA"					

	Yes, I used the FUTURE Act Direct Data Exchange (FA-DDX) to directly import my income information into the FAFSA. Yes,
	but I did not use the FA-DDX. Attached is my signed copy of the 2023 Tax Return and applicable schedules that
	were filed. (The 2023 Tax Return Transcript from the IRS is also acceptable).
	No, I am not filing and I am not required to file a US Tax Return. List your employer(s) and income received in 2023

No, I am not filing and I am not required to file a US Tax Return. List your employer(s) and income received in 2023 below, and attach your W2(s)

Employer / Source of Income (if none, list n/a)	2023 Income (If none, list \$0)
	\$
	\$

E. Parent Tax Forms & Income

Did you (parent) file a 2023 U.S. Federal Tax Return? Please check one box below. If none, list "0" or "NA"

	Yes, I used the FUTURE Act Direct Data Exchange (FA-DDX) to directly import my income information into the FAFSA.	
	Yes, but I did not use the FA-DDX. Attached is my signed copy of the 2023 Tax Return and applicable schedules that	
	were filed. (The 2023 Tax Return Transcript from the IRS is also acceptable).	

No, I am not filing and I am not required to file a US Tax Return. List your employer(s) and income received in 2023 below, and attach your W2(s)

Employer / Source of Income (if none, list n/a)	2023 Income (If none, list \$0)
	\$
	\$

F. High School Completion

Per federal regulations, Southwestern University must receive documentation confirming your high school diploma, recognized equivalent, or homeschool credential. NOTE: The documentation must be submitted to the Financial Aid Office, even if previously provided to another Southwestern University department/office (such as the Admission Office).

Please check the box that best describes the documentation you will be submitted with this completed worksheet.

 \square Copy of the student's high school diploma or final high school transcript showing the date the applicant completed secondary school

OR

 $\hfill\Box$ Copy of a recognized equivalent to a student's high school diploma

- General Education Development Certificate
- Certificate recognized by the state as an equivalent to a diploma
- Academic transcript showing successful completion of at least a two-year program fully acceptable toward a Bachelor's Degree

OR

 \square Copy of homeschool documentation

- Transcript signed by student's parent/guardian certifying completion of secondary education and courses completed by student
- State-issued home school certification credential

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G. Identity Verification & Statement of Educational Purpose

As part of the verification process, you must appear in person, at the Financial Aid Office with the following:

- Valid government-issued photo identification (ID), such as a driver's license, state-issued ID, or passport
- You must sign this form in the presence of a Financial Aid official.

NOTE: Our office will retain a copy of the student's photo ID, annotated with date received and reviewed, with the name of the official authorized to receive and review the student's ID.

If the student is unable to appear in person, at Southwestern University, to verify his or her identity, the student must provide to the institution:

- A copy of the unexpired valid government-issued ID that is acknowledged in the notary statement, or presented to a notary.
- The original Statement of Educational Purpose, which must be notarized (below)

Statement of Educational Purpose						
I certify that I	am the	e individual signing this Statement of Educational Purp	ose			
	(Print Student's Name)					
	,	only be used for educational purposes and to pay the	cost			
of attending Southwestern Ui	niversity for 2025-2026.					
Student's Signature		Date				
Student's ID Number	Student's ID Number					
	Notary's Cartificate	of Acknowledgement				
		unable to appear in person)				
State of	City/County of	, On,				
before me,	, personally ar	ppeared,				
(Notary's n	ame)	(Printed name of signer)				
provided to me on basis of sa	•					
(Type of government-issued photo ID provided) to be the above-named person who signed the foregoing instrument.						
		WITNESS my hand and official seal				
(Notary s	ignature)	(seal)				
My commission expires on						
	Date					

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H. Certification

(If signed above, must also copy original ID's)

By signing this worksheet, we certify that all the information reported is complete and correct. WARNING: If you purposely give false or misleading information, on this worksheet, you may be fined, sentenced to			
jail, or both.			
Student Signature (REQUIRED)	Date		
Parent Signature (REQUIRED)	Date		
SU Financial Aid Staff Member's Signature (Only if witnessing in-person signatures of student and parent)	Date		
SU Financial Aid Staff Member's Name & Title			

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