2022-2023 INDEPENDENT VERIFICATION FORM

DOCUMENTS MAY BE SUBMITTED VIA U.S. MAIL, FAX, OR SECURE UPLOAD. TO UPLOAD DOCUMENTS: LOG INTO MyFSU, STUDENT TAB, FINANCIAL AID ICON, SELECT “SECURE DOCUMENT UPLOAD” ICON. EMAILED DOCUMENTS ARE NOT SECURE AND CANNOT BE ACCEPTED.

FSU Office of Scholarships & Financial Aid
1201 S. State Street, CSS 101, Big Rapids, MI 49307
Phone: 231 598-8210 Fax: 231 591-2950
Email: finaid@ferris.edu

Kendall College of Art & Design
17 Fountain Street NW, Grand Rapids, MI 49503
Phone: 616 451-2787 Fax: 616 831-9689
Email: kcadfinaid@ferris.edu

SECTION I – STUDENT IDENTIFICATION
Your FAFSA application was selected by the government for review in a process called “verification” which is required under Federal Financial Aid Program rules. Failure to provide requested verification documents may result in not being awarded financial aid; cancellation of an existing award; or funds not applying to your account. For more information regarding the verification process, please visit www.ferris.edu/verification. If you need further assistance, please contact the Financial Aid Office.

YOU MUST COMPLETE ALL SECTIONS OF THIS DOCUMENT. INCOMPLETE DOCUMENTS WILL BE RETURNED OR REJECTED.

____________________________________________                    ____________________________________________
Student Last Name         First Name                           M.I.                      Student ID #

_____________________________________________                    ____________________________________________
Permanent Address (include Apt. No.)                                                   Date of Birth

_____________________________________________                     ____________________________________________
City                                State                               Zip Code                        Phone Number (include area code)

SECTION II – TAX DOCUMENTATION

TAX DOCUMENTATION IS REQUIRED FOR ALL STUDENTS AND SPOUSES WHO WORKED or FILED a Federal Tax Return. The specific documentation required depends on whether or not the taxpayer filed a federal tax return. For detailed instructions for providing tax documentation, please visit ferris.edu/dr.

YOU MUST INDICATE THE APPROPRIATE TAX STATUS BELOW FOR BOTH THE STUDENT AND YOUR SPOUSE IF YOU ARE MARRIED. Please select only one option for each column.

Student         Spouse
______         ______ Filed a 2020 federal tax return and has or will complete IRS Data Retrieval or will submit Tax Return Transcript or SIGNED federal 1040 tax returns. For instructions on how to complete the Data Retrieval Tool visit: ferris.edu/DR

______        ______ Worked in 2020 but not required to file a federal tax return. Student (and spouse if applicable) must submit copies of ALL 2020 W2(s) and a verification of Non-filing letter from the IRS. For instructions visit ferris.edu/IRS

______         ______ Did NOT work in 2020, was not required to and did not file a 2020 federal tax return. Student (and spouse if applicable) must submit a verification of Non-filing letter from the IRS. For instructions visit ferris.edu/IRS

If you and your spouse filed taxes separately, you must both provide tax returns/transcripts
SECTION III – FAMILY INFORMATION  July 1, 2022 – June 30, 2023

Enter your (student’s) name and age in this section:

<table>
<thead>
<tr>
<th>Student’s Name</th>
<th>Age</th>
<th>Relationship to Student</th>
<th>Name of College</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>SELF</td>
<td>Ferris State University</td>
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</table>

Enter your spouse’s name and age (if you are currently married) in this section:

<table>
<thead>
<tr>
<th>Spouse’s Name</th>
<th>Age(s)</th>
<th>Relationship to Student</th>
<th>Name of College (If enrolled at least ½ time)</th>
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<td></td>
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<td>SELF</td>
<td>SPOUSE</td>
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Enter the names, ages, and relationship to you (student), of your legal dependents other than your spouse. A legal dependent is someone that you will provide more than 50% of the support for between July 1, 2022 – June 30, 2023. If legal dependent attends college at least ½ time, please list name of college/university.

<table>
<thead>
<tr>
<th>Legal Dependent’s Name (Do not list yourself or your spouse in this section)</th>
<th>Age</th>
<th>Relationship to Student</th>
<th>Name of College (If enrolled at least ½ time)</th>
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SECTION IV– CHILD SUPPORT PAID

Did anyone in your household PAY child support in 2020 for dependents NOT listed above?

_____YES _____NO  If yes, please complete this section.

- Please enter the total amount of child support that was paid in 2020. $__________________.

<table>
<thead>
<tr>
<th>Name of Child for which support was paid</th>
<th>Age</th>
<th>Name of Child for which support was paid</th>
<th>Age</th>
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SECTION V– CERTIFICATION

By signing this form, I certify that all of the above information is complete and correct. Student (and spouse if applicable) must sign and date in ink. **Electronic or typed signatures are NOT acceptable.**

_________________________________________  __________________________
Student                                                      Date