

## 2024-2025 Dependent Verification Worksheet

OPSU Student ID: _	 	
Student Name:		

Your application was selected for review in a process called verification. In this process, OPSU must compare information from your FAFSA with copies of you and your parents **2022 federal tax returns**. OPSU has the right and responsibility to require this information before awarding federal aid. If there are difference between your FAFSA and your application and your other documents, corrections will be submitted.

## 1. Family Information

Number of household members: List the people in the parent's household. Include:

- Yourself;
- Your parents with whom you live or last lived with, including stepparents;
- Your parent's other children if your parents provide more than half of their support from July 1, 2024 through June 30, 2025.
- Any other people who now live with your parents and will continue to live with your parents, and
  your parents provide more than half of their support and will continue to provide more than half of
  their support from July 1, 2024 through June 30, 2025.

Number in college: Include below information about any household member who will be enrolled at least half-time in a degree, diploma or certificate program at an eligible post-secondary institution any time between July 1, 2024 and June 30, 2025. Include the name of the college. **Do not include parents enrolled in college courses.** 

Full Name	Age	Relationship	College	Enrolled at least half- time? Yes or no
		Self	OPSU	

Attach separate sheet if necessary.

## 2. Tax filer information. Mark all that apply.

I filed taxes in 2022	N	ly father/stepfather filed	My mother/stepmother
(attached a tax retu	n, ta	axes in 2022. (attached	filed taxes in 2022.
unless retrieval tool	used) a	tax return, unless	(attach a tax return,
	re	etrieval tool used)	unless retrieval tool used)

Use your <u>2022 Federal Tax Return</u> to complete this form. If the answer is zero or the question does not apply, enter 0.

Parent(s)	2022 Additional Financial Information	Student
Yearly		Yearly
Amount		Amount
\$	Education credits (1040 Schedule 3, Line 3)	\$
\$	IRA Deductions and Payments to SEP, SIMPLE, Keogh, and other qualified plans (1040 Schedule 1, Line 15 + Line 19)	\$
\$	Untaxed portions of IRA, Pension, and Annuity Distributions (withdrawals) 1040 Lines (4a + 5a) minus (4b + 5b), if negative, enter zero, exclude rollovers	\$
\$	Tax exempt interest income (1040 Line 2a)	\$
\$	Income earned, but taxes not filed. Provide copy of the W-2 from each employer, or a Verification of Non-filing letter from the IRS.	\$

2024-2025 Identity	y and Statement of Educational Pur	pose
individual signing this assistance I may be	s Statement of Educational Purpose and t receive will only be used for educational p e State University for the 2024-2025 acad	that the Federal student financial purposes and to pay the cost of attending
Certifications and	l Signatures	
, ,	below certifies that all information reporte se information was reported on the FAFSA	•
Student Signature: _	(must be actual signature, not typed)	Date:
Parent Signature:	(must be actual signature, not typed)	Date:

Warning: If you purposely give false or misleading information you may be fined, sentenced to jail, or both.