



OKLAHOMA PANHANDLE STATE UNIVERSITY

OFFICE OF FINANCIAL AID

P.O. Box 430 • Goodwell, OK 73939 • 580.349.1580

2024-2025 Independent 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 spouse, if you are married;
- Your dependent children if they will receive more than half of their support from you from July 1, 2024 to June 30, 2025. Do not include children for whom child support is paid or foster children.
- Other people if they now live with you and you 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.

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

Attach separate sheet if necessary.

2. Tax filer information. Mark all that apply.

<input type="checkbox"/>	I filed taxes in 2022. (attached a tax return, unless retrieval tool used)	<input type="checkbox"/>	My spouse filed taxes, if married. (attach a tax return, unless retrieval tool used)
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Use your **2022 Federal Tax Return** to complete this form. If the answer is zero or the question does not apply, enter 0.

Student Yearly Amount	2022 Additional Financial Information	Spouse Yearly 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 and Statement of Educational Purpose

I certify that I _____ (student) am the individual signing this Statement of Educational Purpose and that the Federal student financial assistance I may be receive will only be used for educational purposes and to pay the cost of attending Oklahoma Panhandle State University for the 2024-2025 academic year.

Certifications and Signatures

Each person signing below certifies that all information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Student Signature: _____ Date: _____

Spouse Signature (optional): _____ Date: _____

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