

Your aid application was selected for review in a federal process called Verification. We must compare information from your FAFSA with this worksheet and with your 2020 Federal Income Tax information. Should there be differences between your FAFSA and the information that you provided to our office, we will make those corrections to your FAFSA. We reserve the right to ask for further clarification and to request additional information under Federal financial aid program guidelines (CFR title 34, Part 668).

## 2022-23 VERIFICATION WORKSHEET

### A: Student Information

Last Name	First Name	M.I.
Date of Birth	Last 4 SSN	Student ID #
E-mail address		@salemstate.edu
Best Phone Number to reach you		

To complete this process we will need one of these:

1. a direct data transfer from the IRS to your FAFSA **or**
2. an official IRS Tax Transcript
3. a signed copy of your 2020 federal tax return

To easily complete the Data Transfer just log into your FAFSA and click on the secure IRS Data Retrieval tool located in the Financial Information Section.

If you are unable to do the IRS data transfer, you can request an IRS Tax Return Transcript or non filer statement online at [www.irs.gov/Individuals/Get-Transcript](http://www.irs.gov/Individuals/Get-Transcript) or by calling the transcript order line at 800-908-9946.

### B: Family Information

**You are a Dependent Student if your FAFSA required you to provide your parent(s) information. On the table below enter:**

- Yourself and your parent(s) (including stepparent) even if you don't live with your parents, and
- Your parent(s) dependent children, if your parent(s) will provide more than half of their support from July 1, 2022 through June 30, 2023

**You are an Independent Student your FAFSA did not require you to provide you parent(s) information. On the table below enter:**

- Yourself (and your spouse if married)
- Your dependent children, if you will provide more than half of their support from July 1, 2022 through June 30, 2023

**Include other household members only if:** they now live with you (or your parent(s), if dependent) **and if** you or your parent(s) will be providing more than half of their income.

Full name of student and family member(s) who live in or are supported by the household that your FAFSA data refers to. Include any dependent undergraduate students attending another college.	Age	Relationship to you	If a household member is attending college at least half time please write the school name. Do not include this information for a parent(s).
<i>Your name:</i>		SELF	<i>Salem State University</i>

**ANY DELAY IN RESPONDING OR RETURNING THIS FORM MAY RESULT IN A LOSS OF FINANCIAL AID!**

Protect your privacy and send this safely from your salemstate.edu email account to:

[navcenter@salemstate.edu](mailto:navcenter@salemstate.edu)

or fax this form to: 978.542.6876. Be sure to include your supporting documents.

**Questions? Call us at 1-978-542-8000.**

## C: Federal Tax Return Information

### Student (and if married, your spouse):

Please mark your 2020 tax filer status:

- I did not work and I did not file taxes in 2020.  
 I worked in 2020 but I was not required to file taxes so I am submitting my W2 with this form.  
 I worked and filed taxes in 2020 and I am submitting this 2020 tax documentation to you. Choose one:

Data Transfer  Tax transcript  Signed tax return

Tax filers only: please check off your matching filing status:

- Single  Head of Household  
 Married filing:  Jointly  Separately

### Parent of a dependent student:

Please mark your 2020 tax filer status:

- I did not work and I did not file taxes in 2020.  
 I worked in 2020 but I was not required to file taxes so I am submitting my W2 with this form.  
 I worked and filed taxes in 2020 and I am submitting this 2020 tax documentation to you. Choose one:

Data Transfer  Tax transcript  Signed tax return

Tax filers only: please check off your matching filing status:

- Single  Head of Household  
 Married filing:  Jointly  Separately

## D: Federal Untaxed Income, Benefits and Income Exclusions

PLEASE USE ANNUAL AMOUNTS FOR 2020

Student/Spouse	Do not leave any spaces blank, if the answer is ZERO, write the number: "0"	Parent(s)
\$	Enter Child support received for all children. <i>Do not include foster or adoption payments.</i>	\$
\$	If you worked, earned wages and received a W-2, but you were not required to file a tax return, enter the amount of the wages you earned and attach a copy of W-2 forms showing those wages.	\$
\$	Enter payments to tax-deferred pension and savings plan paid directly or withheld from earnings, including amount reported on your W-2 form in Boxes 12a through 12d, codes D,E,F,G,H or S. Do NOT include Code DD.	\$
\$	Social Security Benefits received that were not taxed (such as SSI), Welfare benefits (including Temporary Assistance to Needy Families TANF). Please do not include SNAP benefits or subsidized housing.	\$
<b>I N C O M E E X C L U S I O N S</b>		
\$	Taxable earnings from any need based work programs earned in 2020 including Federal Work Study income.	\$

## E: Additional Financial Questions:

<b>Yes</b>	Do you, or your parent(s) if a dependent student, have income from a rental or vacation property? If yes, you must submit a Property Verification Worksheet available on Ask The Viking.	<b>No</b>
<b>Yes</b>	Do you, or your parent(s) if a dependent student, have a zero or a negative adjusted gross income (AGI) on your tax return? If yes, you must submit an Income Expense Worksheet available on Ask The Viking.	<b>No</b>

## F: Wet Signature or Electronic Stylus Signature Required—If student is Dependent, one parent must sign this form.

By signing this worksheet, I/we certify that all the above information reported is complete and correct to the best of my knowledge. If I left any answers blank, this form will be returned to me for completion. I also understand that a delay in returning this form can result in loss of financial aid.

\_\_\_\_\_  
 Student signature - **wet signature or electronic stylus** Date

\_\_\_\_\_  
 Parent Signature (required, for a dependent student) Date

Protect your privacy and send this safely from your salemstate.edu email account to:

[navcenter@salemstate.edu](mailto:navcenter@salemstate.edu)

or fax this form to: 978.542.6876. Be sure to include your supporting documents.

**Questions? Call us at 1-978-542-8000.**