



2026-2027 Verification Worksheet
Independent Student

INSTRUCTIONS:

Your FAFSA was selected by the U.S. Department of Education for a review process called "Federal Verification." Verification must be completed before your financial aid can be finalized and before any federal aid may be credited to your student account.

- Sign on the bottom of the second page and return the completed form, along with all requested documentation, to the Financial Aid Office.
Verification cannot be completed until all requested documents are received and reviewed.
If tax information must be verified. Also, you can either correct your FAFSA by giving consent to the portion Consent to Retrieve and Disclose FTI or submit a copy of your 2024 IRS Tax Return Transcript to verify income.

Student Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone/Cell: \_\_\_\_\_ Email: \_\_\_\_\_

A. STUDENT (& SPOUSE) TAX/INCOME INFORMATION: If Student (&spouse) Consent was given to Retrieve and Disclose FTI was used, skip this section.

Did you file a Federal Income Tax Return for 2024? [ ] Yes [ ] No

1. If you answered YES, update your FAFSA by giving consent to retrieve and disclose FTI or attach a copy of your 2024 Federal tax return transcript from the IRS or a signed copy of your 2024 income tax return.

- To give consent to retrieve and disclose FTI, log into your FAFSA online at: https://studentaid.ed.gov/sa/fafsa.
Request a free copy of your 2024. Federal tax return transcript on the IRS website at www.irs.gov; click on "Get My Tax Record" enter information as requested; select Type -Return Transcript and 2024 year or call 1-800-908-9946.

If you answered NO:

- Attach a copy of your 2024 W-2s and unemployment documents (if applicable) and identify your untaxed earnings in the table below for parent and spouse (if applicable)
Attach a copy of the Non-Filing Letter from IRS at www.irs.gov for parent and spouse (if applicable)

B. STUDENTs Family Size Information: Must be completed whether taxes were completed

Table with 3 columns: Name, Age, Relationship to student. Multiple empty rows for data entry.



# FINANCIAL AID OFFICE

2500 S. Main, Hope, AR 71802 | (870) 722-8264 | Fax: (870) 722-8145 | [www.uaht.edu](http://www.uaht.edu)

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STUDENT'S NAME \_\_\_\_\_ UAHT ID# \_\_\_\_\_

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I hereby certify that all statements and information provided on this form are true, complete, and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to give proof of the information that I have given on this form. I understand it is a federal crime to purposefully give false or misleading information on this form and that any person doing so may be subject to a fine, imprisonment, or both. (Signatures must be provided by the student. Spouse signature is optional.)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's Signature (optional): \_\_\_\_\_ Date: \_\_\_\_\_