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CMU CENTRAL MICHIGAN UNIVERSITY	**Verification Worksheet** **Dependent**	**V1**
	OFFICE OF SCHOLARSHIPS AND FINANCIAL AID WARRINER HALL 202, MOUNT PLEASANT, MI 48859 PHONE: (989) 774-3674; FAX: (989) 774-3634 Financial Aid Portal	**2026-2027**

Why have you received this form? CMU or the Federal Processor has selected your Free Application for Federal Student Aid (FAFSA) for a process called "Verification." **When should this form be submitted?** Failure to complete and submit this form along with all required documentation to the Office of Scholarships and Financial Aid **within 21 business days** may result in the cancellation of your federal financial aid. ****Once this form is complete, you must also complete the Proof of Identity form.**

STUDENT INFORMATION

Student Name (please print) _____ Campus ID Number _____

FAMILY HOUSEHOLD INFORMATION

List the people in your parent(s)' household, including:

- ✓**Yourself**, even if you don't live with your parent(s)
- ✓**Your parent(s) and/or stepparent** living in the household
- ✓**Your parents' other children** in this household if your parents provide more than half their support
- ✓**Other people** who your parents provide more than half their support and will continue to live in the household through June 30, 2027
  - ➢ *Include age and relationship of each individual in the household*
  - ➢ *Include the college if the household member will attend at least half-time during the 2026-27 academic year*

**If you need more space, attach a separate page.*

FULL NAME	AGE	RELATIONSHIP	COLLEGE (Do Not Abbreviate)

SUBMIT – 2024 INCOME TAX INFORMATION

STUDENT INCOME AND TAX INFORMATION

STUDENT:

➔ List below employer(s) and any income received in 2023 even if you did not receive a W2.
ALL COPIES OF W2 FORMS MUST BE PROVIDED (Schedule C or K-1 if self-employed)

Employer's Name	Amount Earned in 2024
	$
	$
	$

➔ YOU **MUST** CHECK ONE OF THE FOLLOWING:

TAX RETURN FILERS

☐ I have filed a **2024** Federal income tax return & will provide a **Tax Return Transcript** or utilize the **IRS Direct Data Exchange (DDX)** within FAFSA**.**

TAX RETURN NON-FILERS WITH EARNINGS

☐ I did not file, will not file, and **am not required** to file a 2024 Federal income tax return but I **DID** have income earned from work. I will provide the **IRS Wage and Income Transcript**.

TAX RETURN NON-FILERS WITH NO EARNINGS

☐ I did not file, will not file, and **am not required** to file a 2024 Federal income tax return as I had **NO** income earned from work. I will provide the **IRS Wage and Income Transcript.**

CMU CENTRAL MICHIGAN UNIVERSITY	**Verification Worksheet- Page 2** **Dependent**	**V1**
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Student Name (please print) _____ Campus ID Number _____

PARENT INCOME AND TAX INFORMATION

PARENT(S):

➔ List below employer(s) and any income received in 2024 even if you did not receive a W2.
ALL COPIES OF W2 FORMS MUST BE PROVIDED (Schedule C or K-1 if self-employed)

Employer's Name	Amount Earned in 2024
	$
	$
	$

➔ YOU **MUST** CHECK ONE OF THE FOLLOWING:

TAX RETURN FILERS

☐ I have filed a **2024** Federal income tax return & will provide a **Tax Return Transcript** or utilize the **IRS Direct Data Exchange (DDX)** within FAFSA.

TAX RETURN NON-FILERS WITH EARNINGS

☐ I did not file, will not file, and **am not required** to file a 2024 Federal income tax return but I **DID** have income earned from work. I will provide the **IRS Wage and Income Transcript**.

TAX RETURN NON-FILERS WITH NO EARNINGS

☐ I did not file, will not file, and **am not required** to file a 2024 Federal income tax return as I had **NO** income earned from work. I will provide the **IRS Wage and Income Transcript.**

CERTIFICATION AND SIGNATURE

SIGNATURE REQUIRED: I certify that the information provided on this form is true and complete to the best of my knowledge. I understand that based on the information provided changes in my FAFSA financial information may occur and may result in a change in financial aid eligibility.

_____ _____
Student Signature (Handwritten Required **OR ELECTRONIC SIGNATURE USING GLOBAL ID**) Date

_____ _____
Parent Signature (Handwritten Required **OR ELECTRONIC SIGNATURE USING YOUR CREATED PASSWORD**) Date