

Student's Name: _____ Student ID#: _____

E-mail: _____ Cell Phone#: _____ Date: _____

Your FAFSA was selected for verification. In this process we verify the information provided on your FAFSA with the information requested below. If there are differences between the two, we may need to correct your FAFSA information. Upon review, additional information may be required; notification of such will be made as quickly as possible. **We cannot continue processing your financial aid application until all requested information is received and completed.** Federal, state or university need-based aid and/or grant eligibility can only be estimated until this process is complete. Failure to complete verification in a timely manner may result in being ineligible for aid.

A. Household Information (check and complete all that apply)
 List yourself (the student) and the parent(s) / stepparent(s) in YOUR household (where YOU, the student, live):

Full Name	Date of Marriage (if applicable) of Parents/Stepparents listed on FAFSA	Check here if marital status of Parent on FAFSA is Divorced as of date of FAFSA	Relationship to Student	If attending College at least half-time in 2022-2023, what College?
			SELF	Oklahoma City University
	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Parent (1) or <input type="checkbox"/> Stepparent (1)	Parent(s) excluded
	Date of Marriage:	Date of Divorce:	<input type="checkbox"/> Parent (2) or <input type="checkbox"/> Stepparent (2)	Parent(s) excluded

Did BOTH parent(s)/stepparent listed above file a 2020 tax return?
 YES

 NO – Each non-filer parent AND the student **MUST ATTACH CONFIRMATION OF NONFILING STATUS.** *This must be obtained from the IRS by downloading an “IRS Verification of Nonfiling Letter” (VNF) from <https://www.irs.gov/individuals/get-transcript>.*
 Check here if you were unable to obtain the VNF from a tax authority _____ Initial here to certify you attempted.

 List your siblings for whom the parent(s) listed above provide more than half their financial support and will continue to provide it from July 1, 2022, through June 30, 2023:

Full Name	Date of Birth	Relationship to Student	If attending College at least half-time in 2022-2023, what College?
		<input type="checkbox"/> Sibling or <input type="checkbox"/> Stepsibling	
		<input type="checkbox"/> Sibling or <input type="checkbox"/> Stepsibling	
		<input type="checkbox"/> Sibling or <input type="checkbox"/> Stepsibling	

 List other people who live in your household for whom the parent(s) listed above provide more than half their financial support and will continue to provide it from July 1, 2022, through June 30, 2023:

Full Name	Date of Birth	Relationship to Student	If attending College at least half-time in 2022-2023, what College?

B. Check the box that applies to you, the STUDENT - CHECK ONLY ONE:

Check here if you filed taxes, used the IRS Data Retrieval Tool, and **successfully transferred** your tax information when you filed your FAFSA. (If so, no tax transcript is required.)

Check here if you did not /were unable to use the IRS Data Retrieval Tool **AND ATTACH A COPY OF EITHER:**

- **YOUR 2020 FEDERAL TAX TRANSCRIPT** (Get a *Federal Tax Return Transcript* at <https://www.irs.gov/individuals/get-transcript> or by contacting the IRS at 1-800-908-9946. **** Make sure to request the “IRS Tax RETURN Transcript” and not the “IRS Tax Account Transcript”;** **OR**
- **YOUR FILED 2020 FEDERAL TAX RETURN** – You must physically sign the copy with your “wet” signature even if the return was electronically filed.

Check here if you were **NOT EMPLOYED AND HAD NO INCOME** earned from work in 2020.

Check here and complete this chart if you earned income from working in 2020, but you **were not required to file a 2020 income tax return. YOU MUST ATTACH ALL W2s.** (List “self-employed” if you did not have an employer)

Student’s Employment Information	Employer’s Name	Job Title	2020 Amount Earned	Was a W2 issued?
		<i>Jim’s Restaurant (example)</i>	<i>Server</i>	<i>\$2,000.00(example)</i>
				<input type="checkbox"/> YES <input type="checkbox"/> No
				<input type="checkbox"/> YES <input type="checkbox"/> No

C. Check the box that applies to your PARENT(S) - CHECK ONLY ONE:

Check here if your parent(s) filed taxes, used the IRS Data Retrieval Tool, and **successfully transferred** their tax information when you filed your FAFSA. (If so, no tax transcript is required.)

Check here if they did not /were unable to use the IRS Data Retrieval Tool **AND ATTACH A COPY OF EITHER:**

- **YOUR PARENT(S)’ 2020 FEDERAL TAX TRANSCRIPT** (Get a *Federal Tax Return Transcript* at <https://www.irs.gov/individuals/get-transcript> or by contacting the IRS at 1-800-908-9946. **** Make sure to request the “IRS Tax RETURN Transcript” and not the “IRS Tax Account Transcript”;** **OR**
- **THEIR FILED 2020 FEDERAL TAX RETURN** – One parent must physically sign the copy with his/her “wet” signature even if the return was electronically filed.

Check here if your **parent(s) WERE NOT EMPLOYED AND HAD NO INCOME** earned from work in 2019.

Check here and complete this chart if your parent(s) earned income from working in 2020, but **were not required to file a 2020 income tax return. YOU MUST ATTACH ALL W2s.** (List “self-employed” if they did not have an employer)

Parent’s/Stepparent’s Name	Employer’s Name	Job Title	2020 Amount Earned	Was a W2 issued?
	<i>John Q. Parent, Sr.</i>	<i>Suzy’s Auto Body (example)</i>	<i>Mechanic</i>	<i>\$2,000.00(example)</i>
				<input type="checkbox"/> YES <input type="checkbox"/> No
				<input type="checkbox"/> YES <input type="checkbox"/> No

D. Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must print, sign and date.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student’s Handwritten Signature (cannot be electronic)

Date: _____

Parent’s Handwritten Signature (cannot be electronic)

Date: _____