

**2026–27 Verification Worksheet**

PLEASE COMPLETE AND ATTACH ALL OF THE REQUESTED INFORMATION

I. Student Information

Last Name	First Name	Student ID	
Street Address	City	State	Zip
() -			
Student's Phone Number	Student's Email Address	Best Way to Contact (Check One) <input type="checkbox"/> Phone <input type="checkbox"/> Email	
() -			
Parent's Phone Number	Parent's Email Address	Best Way to Contact (Check One) <input type="checkbox"/> Phone <input type="checkbox"/> Email	

II. Family Size

COMPLETE THE CHART BELOW BASED ON YOUR DEPENDENCY STATUS

To determine your dependency status, visit: cedarville.edu/fafsaDependency

WHO IS INCLUDED IN FAMILY SIZE?

DEPENDENT Students	INDEPENDENT Students
<ul style="list-style-type: none"> • Yourself • Your parent and their spouse/partner even if you do not live with your parent(s) (exclude a separated/divorced parent not living in the household) • Your parent(s) other child(ren) if the following are true: <ul style="list-style-type: none"> • They live with your parent(s) or live apart because of college enrollment • They receive more than half of their financial support from your parent(s) • They will continue to receive more than half of their financial support from your parent(s) through June 30, 2027 • Other persons if the following are true: <ul style="list-style-type: none"> • They live with your parent(s) or live apart because of college enrollment • They receive more than half of their financial support from your parent(s) • They will continue to receive more than half of their financial support from your parent(s) through June 30, 2027 	<ul style="list-style-type: none"> • Yourself • Your spouse, if applicable • Your child(ren) if the following are true: <ul style="list-style-type: none"> • They live with you • They receive more than half of their financial support from you • They will continue to receive more than half of their financial support from you through June 30, 2027 • Other persons if the following are true: <ul style="list-style-type: none"> • They live with you • They receive more than half of their financial support from you • They will continue to receive more than half of their financial support from you through June 30, 2027

If more space is needed, provide a separate page with the student's name and ID number at the top

Full Name	Age	Relationship
		Student/Self

III. Student Tax and Income Information for 2024

CHECK ONE AND CONTINUE TO STEP 4

- I used the IRS Direct Data Exchange to transfer 2024 Federal Tax Return Information into my FAFSA
- I am attaching a copy of my 2024 Federal Tax Return Transcript₁
- I am attaching a signed₂ copy of my 2024 Form 1040 Federal Tax Return and Schedule 1 and/or Form 8863 (as applicable)
- I was not required to file a 2024 Federal Tax Return. If I am an independent student, I have attached a signed₂ statement verifying my non-filing status.*
- I was not employed and had no income earned from work in 2024

*** If you were not required to file a 2024 Federal Tax Return, complete the chart below with any income earned from work in 2024. Submit copies of any W-2s or equivalent documents issued by the employer. List every employer even if no documents were issued.**

Employer's Name	IRS W-2 or Equivalent Document Provided?	Annual Amount Earned in 2024
		\$
		\$
		\$

IV. Parent/Spouse Tax and Income Information for 2024 (If Applicable)

CHECK ONE AND CONTINUE TO STEP 5

- I used the IRS Direct Data Exchange to transfer 2024 Federal Tax Return Information into my FAFSA
- I am attaching a copy of my 2024 Federal Tax Return Transcript₁
- I am attaching a signed₂ copy of my 2024 Form 1040 Federal Tax Return and Schedule 1 and/or Form 8863 (as applicable)
- I was not required to file a 2024 Federal Tax Return. I have attached a signed₂ statement verifying my non-filing status.*
- I was not employed and had no income earned from work in 2024

*** If you were not required to file a 2024 Federal Tax Return, complete the chart below with any income earned from work in 2024. Submit copies of any W-2s or equivalent documents issued by the employer. List every employer even if no documents were issued.**

Employer's Name	IRS W-2 or Equivalent Document Provided?	Annual Amount Earned in 2024
		\$
		\$
		\$

V. Certification

By signing this worksheet, I certify all the information reported is complete and accurate.

Student Signature₂

Date

Parent/Spouse Signature₂ (If Applicable)

Date

VIII. Submission

Note: When submitting this document, and other requested documents, please use the online upload tool.

It is your responsibility to blacken out all personal identifying information if you send your document through the mail (all but last four digits of your Social Security number, bank account information, etc.).

Online: Go to mycu.cedarville.edu and search for "Financial Aid Upload Tool."

Mail: Cedarville University Financial Aid
251 N. Main Street, Cedarville, OH 45314

If you filed a non-IRS Income Tax Return, a foreign tax return, an amended IRS Income Tax Return, were a victim of IRS Tax Related Identity Theft, or filed an extension, then other documentation may be accepted or required. Please contact the Financial Aid office for more information.

₁ To request a Federal Tax Return Transcript from the IRS, visit [IRS.gov](https://www.irs.gov) and click "Get your Tax Record" or "Get Transcript Online"

₂ Signatures must be "wet signatures" meaning signed with pen in hand