



STUDENT FINANCIAL SERVICES  
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## 2026-2027 INDEPENDENT Verification Worksheet

### Verification Group V5

**Your Free Application for Federal Student Aid (FAFSA) was selected for review in a process called "Verification".**

The following items are required prior to a financial aid award being finalized:

- 1) This completed and signed Verification Worksheet.
- 2) Your 2024 Federal Tax Return Transcript (if Future Act Direct Data Exchange FA-DDX was not utilized), or if applicable, the Statement of Non Filing in Option 2. Any W-2 or 1099 statements from 2024.
- 3) Your Spouses' 2024 Federal Tax Return Transcript (if Future Act Direct Data Exchange FA-DDX was not utilized), or if applicable, the Statement of Non-Filing in Option 2.
- 4) Any W-2 or 1099 statements from 2024.

*If there are any differences between your FAFSA information and your financial documents, LaSalle University may need to make corrections to your record.*

### Section A: Student's Information

\_\_\_\_\_  
Last Name, First Name, M.I.

\_\_\_\_\_  
Student ID Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone Number

### Section B: Independent Student's Family Information

**List below the people in the student's household. Include:**

- The student.
- The student's spouse, if the student is married.
- The student's or spouse's children if the student or spouse will provide more than half of the children's support. Other people if they now live with the student and the student or spouse provides more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2027.
- Indicate who in your household is or will be attending an institution of higher education at least half-time from July 1, 2026 to June 30, 2027.

*If more space is needed, attach a separate page with the student's name and Student ID Number at the top.*

Full Name	Age	Relationship	Name the College the Household Members are Currently Attending	Did/Will this person file a 2024 Federal Tax Return?
		Self	LaSalle University	Yes ____ No ____
				Yes ____ No ____
				Yes ____ No ____
				Yes ____ No ____
				Yes ____ No ____
				Yes ____ No ____
				Yes ____ No ____
				Yes ____ No ____

**Note: We may request additional documentation if we have reason to believe the information is inaccurate.**

**Section C: Student and Spouse (if married) Tax Filing Status for calendar year 2024:**  
Please complete Option 1 or Option 2.

**Option 1: Student and spouse (if married) filed a 2024 IRS Tax Return:** Please select an option below.

- ☐ Future Act Direct Data Exchange FA-DDX was used to file FAFSA or,
- ☐ 2024 IRS Tax Return Transcript is attached. To obtain an IRS Tax Return Transcript go to [www.irs.gov](https://www.irs.gov) and click “**Get Your Tax Return.**”

**Option 2: Student and Spouse (if married) was a Non-tax Filer for calendar year 2024:**  
I certify that I did not, and am not required to file a 2024 U.S. Federal Tax return. You are required to submit an official IRS Verification of Non-Filing Letter, go to [www.irs.gov](https://www.irs.gov) to request this document. Please select an option below.

- ☐ Was not employed and had no income earned from work in 2024.
- ☐ Was employed in 2024, but did not file a federal tax return. Complete the table below to report all employers and amount earned in 2024. You may be required to provide copies of your IRS W-2 forms for 2024.

Employer’s Name	2024 Amount Earned

## Section D: Identity

**The form must be completed and signed in the presence of either a LaSalle University Financial Aid Administrator or a Notary Public.**

**Do not complete this section in advance.**

### Identity (To be signed at the institution)

Name of Student: \_\_\_\_\_ Student ID#: \_\_\_\_\_  
Last Name First Name M.I.

The student must appear in person at LaSalle University to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID. In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

If Submitting in Person: Present this form with original valid government-issued photo ID To be completed by a LaSalle University Financial Aid Administrator.	
ID Type:	
ID Number:	Exp. Date:
FAA Name:	
FAA Title:	
FAA Signature:	Date:

## Identity (To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at Rosemont College to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's ID Number

If Submitting by Mail: Send this form with photocopy of valid government-issued photo ID <b>To be completed in the presence of a Notary Public.</b>	
<b>State of:</b> _____	
<b>City/County of:</b> _____	
<b>Date:</b> _____	
<b>Before me,</b> <b>(print Notary's name):</b> _____	
<b>Personally Appeared,</b> <b>(printed name of signer):</b> _____	
<b>Proved to me on the basis of satisfactory evidence of identification:</b> _____ (type of unexpired government-issued photo ID provided)	
<b>To be the above -named person who signed the foregoing instrument.</b>	
<b>Signed:</b> _____ (Notary Signature)	<b>My commission expires on:</b> _____
<b>Witness my hand and official seal</b>	

## Section E: Certification and Signatures

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

Each person signing this worksheet certifies that all of the information reported is complete and correct.

Print Student's Name: \_\_\_\_\_

Student's ID Number \_\_\_\_\_

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Spouse's Signature \_\_\_\_\_

Date: \_\_\_\_\_