

## OFFICE OF FINANCIAL AID

WHIPPLE BARN, 2<sup>ND</sup> FLOOR • HAMPTON, VA 23668 • TELEPHONE: 800-624-3341 • (757) 727-5635

## 2024-2025 Verification Worksheet • Independent Student (V5)

Your 2024–2025 Free Application for Federal Student Aid (FAFSA) was selected for review for a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information we will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and your spouse (if married) whose information was reported on the FAFSA must complete and sign this worksheet, attach any required documents, and submit the form with any other required documents to the financial aid office. Please note that we may ask for additional documentation if we have reason to believe that the information provided is inaccurate. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

A.	Independent Student Information	HU Student ID#				
	Print Student Last Name	Print Student Fire	st Name	Print Student M.I.		
	Social Security Number	Student Primary Phone I	Number	Student Date of Birth		
В.	Independent Student's Family Information List below the people in the student's household. In the student (or live apart by the receive more than half their support from the student half of their support from the student; and they will be former space is needed, attach a separate page with	ecause of college enrollment); the cause of college enrollment); the cause year. (4) Othell continue to receive more than h	ney receive more than ha ner persons if the followi nalf their support from th	If of their support from the student; and they wing are true: they live with the student; they rec	vill continue to	
	FULL NAME	AGI	E	RELATIONSHIP TO STUDEN	Т	
C.	Independent Student's Income Information to Be Verified  STUDENT SECTION (Check ONE box only)  SPOUSE SECTION (Check ONE box only)					
	I consented to the Future Act Direct Data Exch tax information (FTI) into the FAFSA, and the transfer	ange to transfer 2022 IRS federal	al O I consented to the Future Act Direct Data Exchange to transfer 2022 IRS federal tax information (FTI) into the FAFSA, and the transfer was successful.			
	I consented to the Future Act Direct Data Exch tax information (FTI) into the FAFSA income tax infor transfer was not successful. <b>Please attach your 202</b>	mation (FTI) into FAFSA, but the				
	I am not required to file and I did not / will not 2022. Please complete and attach Verification of 2 Student Nontax Filers form for 2024-2025 available Financial Aid.	2022 Income Information for	2022. Please complet	to file and I did not / will not file IRS federal inc e and attach Verification of 2022 Income Ir orm for 2024-2025 available at Forms — Hamp	nformation fo	
D.	Identity/Statement of Educational Purpos	se – At the Institution	,			
	The student must appear in person at Hampton Univers the notary statement below, such as but not limited to is annotated with the date it was received and the nan presence of the institutional official, the following Staten	a driver's license, other state-issue ne of the official at the institution a	d ID, or passport. The inst uthorized to collect the stu	itution will maintain a copy of the student's photo	ID that	

## E. Identity and Statement of Educational Purpose - To Be Signed with Notary

If the student is unable to appear in person at Hampton University to verify his or her identity, the student must provide:

- (a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state- issued ID, or passport; and
- (b) The original notarized Statement of Educational Purpose provided below.

## **Statement of Educational Purpose**

Hampton University for 2024-2025.	the federal student financial assistance li	may receive will only be used for educatio	ent of Educational Purpose and that the onal purposes and to pay the cost of attending		
(Student's Signature)	(Date)	(Student's HU ID #)			
	Notary's Certificate	of Acknowledgment			
State of, before me, On, before me,		City/County of			
(Date)	(Notany's Name)	, personally appeared	(Print name of signer)		
and proved to me on basis of satisfactory evidence of identification,			, to be the above-named person who signed the		
foregoing instrument.  WITNESS my hand and official seal  (seal)		(Notary	signature)		
		My commission expires on	(Date)		
Certifications and Signatures  Each person signing this worksheet certifies	that all of the information reported on i	t is complete and correct.	WARNING: If you purpose give false or misleading information on this worksheet, you may be fined, sentenced to jail, o		
Student's Signature (Required		Date	both.		
	if married)				

Do not mail this worksheet to the U.S. Department of Education. Mail the completed document to the above address. Do not submit via email or fax.