

**2026-2027 Verification Worksheet • Independent Student (V5)**

Your 2026–2027 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 First Name	Print Student M.I.
_____	_____	_____
Social Security Number	Student Primary Phone Number	Student Date of Birth
_____	_____	_____

**B. Independent Student’s Family Information**

List below the people in the student’s household. Include: (1) yourself (the student). (2) The student’s spouse, if the student is married. (3) The student’s or spouse’s children if they live with the student (or live apart because of college enrollment); they receive more than half of their support from the student; and they will continue to receive more than half their support from the student during the award year. (4) Other persons if the following are true: they live with the student; they receive more than half of their support from the student; and they will continue to receive more than half their support from the student during the award year.  
If more space is needed, attach a separate page with the student’s name and HU Student ID# at the top.

FULL NAME	AGE	RELATIONSHIP TO STUDENT

**C. Independent Student’s Income Information to Be Verified**

STUDENT SECTION (Check ONE box only)	SPOUSE SECTION (Check ONE box only)
<input type="radio"/> I consented to the Future Act Direct Data Exchange to transfer 2024 IRS federal tax information (FTI) into the FAFSA, and the transfer was successful.	<input type="radio"/> I consented to the Future Act Direct Data Exchange to transfer 2024 IRS federal tax information (FTI) into the FAFSA, and the transfer was successful.
<input type="radio"/> I consented to the Future Act Direct Data Exchange to transfer 2024 IRS federal tax information (FTI) into the FAFSA income tax information (FTI) into FAFSA, but the transfer was not successful. <b>Please attach your 2024 IRS Tax Return Transcripts.</b>	<input type="radio"/> I consented to the Future Act Direct Data Exchange to transfer 2024 IRS federal tax information (FTI) into the FAFSA income tax information (FTI) into FAFSA, but the transfer was not successful. <b>Please attach your 2024 IRS Tax Return Transcripts.</b>
<input type="radio"/> I am not required to file and I did not / will not file IRS federal income taxes for 2024. <b>Please complete and attach Verification of 2024 Income Information for Student Nontax Filers form for 2026-2027 available at <a href="#">Forms – Hampton University Financial Aid</a>.</b>	<input type="radio"/> I am not required to file and I did not / will not file IRS federal income taxes for 2024. <b>Please complete and attach Verification of 2024 Income Information for Student Nontax Filers form for 2026-2027 available at <a href="#">Forms – Hampton University Financial Aid</a>.</b>

**D. Identity/Statement of Educational Purpose – At the Institution**

The student must appear in person at Hampton University to verify his or her identity by presenting a 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. The institution will maintain a copy of the student’s photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student’s ID. In addition, the student must sign, in the presence of the institutional official, the following Statement of Educational Purpose provided below.

**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

I certify that I, \_\_\_\_\_, (Print Student's Name) am the individual signing this Statement of Educational Purpose and that the Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Hampton University for 2026-2027.

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Student's HU ID #)

### Notary's Certificate of Acknowledgment

State of \_\_\_\_\_ City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_, personally appeared \_\_\_\_\_  
(Date) (Notary's Name) (Print name of signer)

and proved to me on basis of satisfactory evidence of identification, \_\_\_\_\_, to be the above-named person who signed the  
(Type of government-issued photo ID provided)

foregoing instrument.

**WITNESS my hand and official seal**  
(seal)

\_\_\_\_\_  
(Notary signature)

My commission expires on \_\_\_\_\_(Date)

### F. Certifications and Signatures

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

\_\_\_\_\_  
Student's Signature (Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature (Required, if married)

\_\_\_\_\_  
Date

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

**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.**