

STAFF USE ONLY				
Form Received by				
Date				

2023-2024 Verification Worksheet

Independent Student – Tracking Group V5

Your 2023–2024 Free Application for Federal Student Aid (FAFSA) was selected for review in 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 the MATC financial aid office will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences between your FAFSA application information and this worksheet and/or documents you submitted, MATC will send corrections electronically to the federal processing center to have your application reprocessed. The MATC financial aid office may ask for additional information.

A. INDEPENDENT STUDENT'S INFORMATION (Please prin

Student's Last Name	Student's First Name	Student's M.I.	Student's ID Number	
Student's Street Address (include apt. no.)			Student's Date of Birth	
City State Zip Code		Email Address		
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number	

B. FAMILY INFORMATION

Number of Household Members: List below **ALL** of the people in your (the student's) household for whom you provide more than half their support. Include:

- 1 Yourself.
- 2. Your spouse (unless you are legally separated and your spouse lives at another address).
- 3. **Your dependent children** if you provide more than half of their support and will continue to provide half of their support from July 1, 2023, through June 30, 2024.

Number in College: Include in the space below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2023, and June 30, 2024, and include the name of the college.

NOTE: You may be asked to provide additional documentation if we have reason to believe that the information regarding the household members is inaccurate.

Full Name of Everyone in the Household	Age	Relationship to Student	College Planning to Attend in 2032-24
		SELF	Milwaukee Area Technical College

If there are additional household members, add them on a separate sheet of paper and submit along with this worksheet.

Printed Student Name		Student ID Number		
C. DOCUMENTATION OF IDEN	ITITY/STATEMENT OF EDUCATIO	NAL PURPOSE		
campuses and present your overification worksheet. An MAT copy of your current photo ID, a	current government issued ID (such C staff member will need to validate th	ar in person at an MATC Admissions Center a as a driver's license, military ID, passport, et e statement below at the time of submission by near in person to submit this worksheet, you as Cannot be accepted).	c.) and this naintaining a	
Statement of Educational Purpos	e			
		am the individual signing this State	ement of	
•	(Print Student's Name)			
Educational Purpose and that the fethe cost of attending Milwaukee Are		y receive will only be used for educational purpos	es and to pay	
	Date MA	TC Staff Member Signature Date		
at an MATC Adm	itnessed below by either an MATC staff issions Center or by a Notary if you are	member when you submit this worksheet in perso emailing, faxing or mailing the worksheet. NAL PURPOSE (continued)	n	
Notary's Certificate of Knowledge				
	,			
	City/County of		before me,	
	City/County of	red,	_before me,	
(Notary's Name)	City/County of	red,(printed name of signer)	_before me,	
	City/County of	red,(printed name of signer)	_before me,	
	City/County of personally appea sfactory evidence of identification	red,(printed name of signer)	_before me,	
And provided to me on basis of satis	City/County of personally appea sfactory evidence of identification	(printed name of signer) (Type of government-issued photo ID provided)	_before me,	
And provided to me on basis of satis	City/County of personally appears personally	(printed name of signer) (Type of government-issued photo ID provided)	nisleading	

Printed	d Student Name	Student ID Number				
E. ST	UDENT (& SPOUSE, IF MARRIED) INCOME INFORMA	TION:				
Check	one below and then complete the grid below even if the amou	nt is zero dollars:				
	Check here if you and/or your spouse filed 2021 taxes and used the IRS Data Retrieval Tool to complete the FAFSA, and if you did not make changes to the FAFSA fields after the retrieval tool was used.					
	☐ Check here if you and/or your spouse filed 2021 taxes and have attached a Federal Tax Return Transcript (and a signed copy of the 1040X if amendments were made after filing).					
	Check here if you and/or your spouse will not file and are not required to file a 2021 Federal Tax Return. In the table below, list your employer(s) as well as any income received in 2021.					
RS Tax at 1-800	Transcripts, Letters of Non-filing, and Wage & Income Transcripts may 908-9946. The Milwaukee IRS Office is located at 211 West Wisconsin	be requested at https://www.irs.gov/i Ave. To schedule an appointment, pl	individuals/get-transcript or by phone ease call 1-844-545-5640.			
	Employer's Name	2021 Amount Earned	IRS W-2s Attached (Y/N)			
F. CE	RTIFICATION AND SIGNATURES					
	udent by signing this worksheet certifies that all of the infi ign and date. (Electronic Signatures are not acceptable.)	ormation reported on it is com	plete and correct. The student			
Student	's Signature	Date				