

SECTION A: STUDENT INFORMATION

Office of Financial Aid Pioneer Hall 190 100 E. Claflin, Salina, KS 67401

Telephone: (785) 833-4316 *FAX*: (785) 404-1485 *Email*: finaid@kwu.edu

V5 Independent Institutional VerificationWorksheet

IMPORTANT: Your FAFSA was selected by the U.S. Department of Education for a process called verification. The verification process will be conducted by Kansas Wesleyan University in accordance with U.S. Department of Education's rules 34 CFR, Part 668. We must collect this information before awarding Federal Financial Aid. No further processing will be done until all documentation is provided.

I am completing FAFSA verification for the term(s): Fall 20______ Spring 20______ Summer 20 _____

Student Name: Last	First	Middle Initial	KWU Student ID	# or Social Security Number	Date	
Student I	Email address		Student Cell Phone number			
CTION B: FAMILY INFORMATI	<u>ON</u>					
Your children, ifOther people if tmore than half c	ouse if you have o you provide more they currently live wif their support bet	than half of their supp with you, and you prov ween July 1st and June 30	ride more than hal	and June 30 th of the current ac f of their support and will co demic year. al family members listed. **	ontinue to provid	
Full Name	Age	e Relationship to	Student	College attending (current year)	Enrolled at Least Half Time (Y/N)	
		Self		Kansas Wesleyan University		
fice Use Only:	#	ī	#	Init	ials	
nee ose only.	T .		TT .			
	orm 1040, Puerto circumstances tha	t is true for you regard	ing your tax filing	ax return. status. If you will not/did no rom work in the box below		
Student's (and	Spouse's)	Tax and Inco	me Inforn	nation	0	
- i	•				- IDC	
i/ we gave consent	and approval for F <i>i</i>	AFSA to obtain my/our	rederal tax inform	ation automatically from th	e iks.	

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i/ we ala no	t and will not file a U.S. Income	Tax Return b	ecause (initial one option):			
	I/We had zero earned OR	۱/	I/We had too little taxable income to be required			
	or taxable income in	to	file a tax return. <u>Please comple</u>	ete the table		
	the required FAFSA		elow and attach a copy of all V	V-2 forms for		
	tax year	<u>st</u>	udent and spouse.			
Emplo	nver	•	Amount earned	W-2 Attached		
Limpic	ycı		Amount carried	(Y/N)		
			\$			
			\$			
			\$			
I DID receive a GED.			IF NO: □ HS Transcript Requested from HS			
I DID graduate fro	m a home school program.		□ Dt □Aid Placed on Hold			
I DID NOT receive a high school diploma or its equivalent from any of		from any of	☐ HS Transcript received	Dt		
	the above sources.		☐ HS Transcript Ok: Yes or No			
the above sources						
the above sources graduated from mentation approp		irement. If a	ved a GED, your application and admidditional documents are needed, the ore semester hours, please have your	Office of Financial A		
the above sources graduated from mentation approp it your KWU emai forwarded to the	oriate to satisfy this federal requ I account. If you were admitted KWU Office of Financial Aid.	irement. If a	dditional documents are needed, the	Office of Financial A		
the above sources u graduated from umentation approp at your KWU emai forwarded to the	oriate to satisfy this federal requal account. If you were admitted KWU Office of Financial Aid.	irement. If a with 24 or m	dditional documents are needed, the	Office of Financial A		
the above sources I graduated from mentation approp t your KWU emai forwarded to the ON E: SIGNATURES VARNING: If you	oriate to satisfy this federal requal account. If you were admitted KWU Office of Financial Aid. Durposely give false or misleading subject to a Federal fire.	irement. If a with 24 or m	dditional documents are needed, the ore semester hours, please have your	Office of Financial A official high school school student aid, you ma		

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SECTION F: IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE

(To be completed in front of a Student Financial Planning Representative or Notary Public)

INSTRUCTIONS FOR SUBMISSION OF THIS FORM: (Please read carefully.)

- Option 1: Present this form IN PERSON to the Kansas Wesleyan University Office of Financial Aid along with an unexpired valid, government-issued photo identification (i.e. driver's license, state-issued photo identification, military identification, or passport). If you present this form in person to the KWU Office of Financial Aid, we will maintain a copy of your government photo identification and date received and name of official who collected it.
- Option 2: If you are unable to present this form in person to KWU Office of Financial Aid, you MUST SIGN BELOW IN THE PRESENCE OF A NOTARY PUBLIC to have this form notarized. Notary publics can typically be found at banking institutions and government offices such as your local County Clerk.

IMPORTANT: Please read and sign the Statement of Educational Purpose below indicating that the statement and all other information contained on this worksheet is true and correct. WARNING! If you purposely give false or misleading information to help establish eligibility for federal student aid, you may be subject to a federal fine, a prison sentence, or both. By signing this statement, you certify that all the information reported in and for this student's application for financial aid is complete and accurate.

STATEMENT OF EDUCATIONAL PURPOSE

_____ am the individual signing this Statement I certify that I _____ (Print Student's Name) 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 Kansas Wesleyan University for the academic year of this verification. Student Signature Date Student ID Number NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT (for those unable to appear in person in the KWU Student Financial Planning Office) State of ______, City/County of _____ On this date of ______, before me (notary's name), personally appeared (name of person signing this form) ______ and proved to me on basis of satisfactory evidence of identification (type of government-issued photo ID provided) _____ to be the above-named person who signed the foregoing instrument. WITNESS my hand and official seal: My commission expires on:

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by Initials

Notary Public's Signature

Government ID accepted by

Attach photocopy of student's government Issued ID.

C Entered on FAA Access-On-Line on Date

KWU SFA ONLY:

Attach FAA Access On Line print-