



Information updated from
original FAFSA.
____ Initial
____ Date

Office of Financial Aid & Scholarships 2025-2026 Independent Verification Worksheet

Section 1: Student Information

Student name (Last name, First name)

A-State ID number

Cell phone number

Independent Student

Section 2: Student's Spouse Information

List your spouse below, if applicable. Do not list your spouse if you are divorced, separated, or widowed. If your spouse will be attending college at least half-time (6 credits or more) in a degree, diploma or certificate program between July 1, 2025 and June 20, 2026, please list the name of the college your spouse is attending.

Full Name	Age	Date of Birth	Relationship to Student	College Attending

Section 3A: Student's Household Information - Children

Read carefully and list the following individuals.

- You or your spouse's children**, if you will provide more than half of their support from July 1, 2025 through June 30, 2026. Do not include foster children.
- Individuals in college**, list below that will be attending college at least half-time (6 credits or more) in a degree, diploma, or certificate program between July 1, 2025 and June 30, 2026. Please list the name of the college they are attending.

Full Name	Age	Date of Birth	Relationship to Student	College Attending

Section 3B: Student's Household Information - Other Individuals

- Other individuals.** Only include those if they live with you and will receive more than half of their support from you and will continue to receive this support from July 1, 2024 through June 30, 2025. Support is defined as the basic maintenance costs for the entire 12-month period. Items considered as support include, but are not limited to food, housing, clothes, car, medical and dental care, money, etc. Please mark all types of support provided by your parents for the individual(s) listed below.

Full Name	Age	Relationship to Student	Housing	Food	Insurance
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Student Name: _____ ASU ID Number: _____

☐ I used the FAFSA IRS Data Retrieval Tool to electronically transfer my 2023 Federal Tax Return information into the FAFSA.

☐ I am unable or choose not to use the IRS Data Retrieval Tool in the FAFSA. I am submitting a signed copy of my 2023 Federal Tax Return. ***Individuals that file Married Filing Separately must submit tax information for both individuals.***

☐ I will **NOT** file and/or I am **NOT** required to file a 2023 Federal Tax Return. ***If you earned wages in 2023, please complete the table below.***

Student's Name	Employer or Source of Earned Income from Work	Gross Earnings in 2023 (See Box 1 of W2)	W-2 or 1099 Issued?
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

Spouse's Name	Employer or Source of Earned Income from Work	Gross Earnings in 2023 (See Box 1 of W2)	W-2 or 1099 Issued?
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
		\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

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