



___ Independent
___ Dependent

Aggregate Verification Group – V5 2022-2023

Your 2022-2023 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, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need correcting. You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may request additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

Student's Last Name	First Name	M.I.	Student's Identification (ID) Number
Student's Street Address (include apt. no.), City, State, Zip Code			Student's Phone Number

Parent information is required on this form ONLY if the student was required to provide parental information on the FAFSA.

Number of Household Members:

If the student was required to provide parent information on the FAFSA, please include:

- The student.
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parents' other children if the parents will provide more than half of their support from July 1, 2022, through June 30, 2023, or if the other children would be required to provide parental information if they were completing a FAFSA for 2022–2023. Include children who meet either of these standards even if the children do not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of their support and will continue to provide more than half of their support through June 30, 2023.

If the student was NOT required to provide parent information on the FAFSA, please include:

- The student.
- The student's spouse, if the student is married.
- The student's or spouse's children, if the student or spouse will provide more than half of their support from July 1, 2022, through June 30, 2023, even if the children do not live with the student.
- Other people if they now live with the student and the student or spouse provide more than half of their support and will continue to provide more than half of their support through June 30, 2023.

In the last column, list the college that household member is attending, if they are attending at least half-time (6 credit hours) at any time between July 1, 2020 and June 30, 2021. Do not include colleges attended by parents.

Full Name	Age	Relationship	College Attending
		<i>Self</i>	<i>UA Cossatot</i>

Identity and Statement of Educational Purpose (To Be Signed in the Presence of a notary)

Complete this page only if you are mailing in this form.

If the student is unable to appear in person at Cossatot Community College of the University of Arkansas to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and
- (b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Identity and Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of Educational Purpose
(Print Student's Name)

and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Cossatot Community College of the University of Arkansas for 2022-2023.

(Student's Signature)

(Date)

Notary's Certificate of Acknowledgement

State of _____ City/County of _____ On _____,
(Date)

before me, _____ personally appeared,
(Notary's Name)

_____, and provided to me on the basis of satisfactory evidence of
(Printed Name of Signer)

identification _____ to be the above-named person who signed the
(Type of unexpired government-issued photo ID provided)

foregoing instrument. **WITNESS my hand and official seal**

(Seal)

My commission expires on _____
(Date)

(Notary Signature)

Identity and Statement of Educational Purpose (to be signed at institution)

Complete this section only if you are bringing this form to campus.

The student must appear in person at **Cossatot Community College of the University of Arkansas** to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), 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 by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of Educational Purpose and
(Print Student's Name)

that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Cossatot Community College of the University of Arkansas for 2022-2023 academic year..

(Student's Signature)

(Date)

UAC Financial Aid Office Use Only:

I verify that this student, is the said student, which has signed and dated the above document.

(Signature/Title)

(Date Received)

Office signature required when form is completed in person

Please check the box(es) below that describes the tax filing status on the FAFSA for the student, spouse (if applicable), and parent(s) (if applicable).

Ex: If student is independent and single, check one box for student. If student is married, check one box for student and one box for spouse. If student is dependent, check one box for student and one or two boxes for parent(s), depending on their marital status

	Student	Spouse	Parent 1	Parent 2
I have used or will use the IRS Data Retrieval Tool DRT to transfer 2020 income information from the IRS into the FAFSA. If I am unable or choose not to use the DRT, I will provide a signed 2020 tax return and Schedules 1, 2, and 3 if applicable or a Tax Return Transcript from the IRS.				
I did not work in 2020. I will provide verification of non-filing as described below.				
I worked in 2020 but did not (and was not required to) file a 2020 tax return. If checked, please complete the chart below. I will provide verification of non-filing as described below.				

If you worked in 2020, but did not file taxes:

List every employer, even if the employer did not issue an IRS W-2 form. If more space is needed, provide a separate page with the student's name and ID number at the top.

Employee's Name	Employer's Name	2020 Amount Earned	IRS W-2 Provided?
<i>Student/Spouse or Parent's Name (example)</i>	<i>Suzy's Auto Body Shop</i>	<i>\$2,000.00</i>	<i>Yes</i>

If you did not file a 2020 tax return:

Please provide documentation from the IRS or other relevant tax authority dated on or after October 1, 2021, indicating a 2020 IRS income tax return was not filed with the IRS or other relevant tax authority.*Please note: students that did not file taxes and were required to provide parent information on the FAFSA will not be required to obtain verification of non-filing for themselves.* A link to obtain verification of non-filing is provided on the UA Cossatot website under 2022-2023 Financial Aid Forms.

___ Check here if a non-filing statement is provided.

___ Check here if a non-filing statement will be provided later.

Certification and Signature

Each person signing below certifies that all of the information reported is complete and accurate. The student and one parent (if applicable) must sign and date. I give the CCCUA Financial Aid Office authorization to make necessary corrections.

Student's Signature

Date

Parent's Signature

Date