

Huntsville Bible College

2023-2024 Verification Worksheet – Independent V5

Your FAFSA has been selected by the Federal Student Aid processor for a review process called verification. Financial Aid program regulations (34 CFR, Part 668) require schools to check the accuracy of information provided on a selected 2023-24 FAFSA and send to the Federal Student Aid processor any necessary corrections identified in the verification process. Your current aid offer is not final and all need-based student aid cannot be disbursed until verification has been completed.

| 1 | | | | | | |
|---|-----------------------------------|--|---|--|--|--|
| Student's Name: | | | | | | |
| Student's email Address: | | | Student Phone #: | | | |
| 1. As of today: FAMILY/ HOUSEI | HOLD (| & COLLEGE IN | NFORMATION (Check and respond to each box) | | | |
| List yourself | | | | | | |
| List your spouse, if currently living | g togethe | er | | | | |
| A. You will provide more than hale B. The child would be required to the FAFSA. Do not include for List other people ONLY IF they not | If of their provide ster children | r support from Ju your information dren in the house with you and you | n't live with you, include them ONLY IF: uly 1, 2023 through June 30, 2024, or n when applying for Federal Student Aid on chold. provide more than half of their support and m July 1, 2023 through June 30, 2024. | | | |
| Name | Age | Relationship | College attending in 2023-24 (half-time or more) | | | |
| | XXXX | Self | Do NOT include if in Running Start or college in high school programs. | | | |
| | XXXX | Spouse (if applicable) | | | | |
| | ΑΛΛΛ | Spouse (ii applicable) | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

If you need more space, please attach a separate sheet.

| 2021 Income & Tax Documentation: If you and/ | or your parent(s) were requir | red | to file a 2021 U.S. ta | x r | eturn, you have three | | | |
|--|---------------------------------|------|------------------------|-----------------|-----------------------------------|--|--|--|
| options for providing this information to HBC: | | | | | | | | |
| 1.) If you successfully transferred you and your pa | | | | | | | | |
| FAFSA, you are done. If you did not, you can return to your online FAFSA and may make corrections to your FAFSA by utilizing the | | | | | | | | |
| DRT to meet this requirement, or 2.) Submit a Tax RETURN Transcript from the IRS website at http://www.irs.gov/Individuals/Order-a-Transcript . If parents currently | | | | | | | | |
| live together and filed as "Married, filing separ | | | | | | | | |
| Return Transcript, (Call 200-908-4490 to obtain a TRDV transcript if you were a victim of "Tax Administration Identity Theft") or | | | | | | | | |
| 3.) Submit photocopy of photocopies of SIGNED original 2021 1040(s) that were submitted to the IRS. | | | | | | | | |
| STUDENT'S TAX & INCOME INFORMATION (check only one box below) | | | | | | | | |
| A.) I have provided my 2021 U. S. Federal 1040 tax return using the IRS Data Retrieval Tool via the online FAFSA application | | | | | | | | |
| NOTE: This is an option only if your IRS data was successfully transferred to your FAFSA or | | | | | | | | |
| B.) I have attached 1.) A copy of my 2021 U. S. Fe | | | | tra | nscripts are NOT accepted.) | | | |
| 2.) A copy of my 2021 SIGNE C.) I did not file and am not required to file. If you | D original 1040 tax return subm | | | - | on applayor If you | | | |
| worked but did not file any tax return, please li | | | | .01 | an emproyer. If you | | | |
| Employer(s) complete this section if box C is checked above. | | | ere you issued a W- | 2? | | | | |
| | \$ | | Yes (attached) | | No (explain below) | | | |
| | \$ | П | Yes (attached) | | No (explain below) | | | |
| | \$ | Ħ | Yes (attached) | T | No (explain below) | | | |
| | \$ | П | Yes (attached) | Ħ | No (explain below) | | | |
| Attach a W-2 for each employer checked "Yes" | * | xnl | , | <u>—</u> 2 с | \ 1 / | | | |
| Times with a for the sum of the s | moorer riemse province unite | ·-P- | | | umot de provideu. | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 6. SIGN THIS WORKSHEET | | | | | | | | |
| By cigning this workshoot, we cartify that all the | | | | | | | | |
| By signing this worksheet, we certify that all the information reported on this worksheet is complete and correct. | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Student | | | Date | | | | | |
| Statent | | | Duic | | | | | |
| | | | | | | | | |
| Warning: If you purposely give false or misleading w | information on this workshoo | ot 1 | you may he fined sont | oni | ced to jail or both | | | |
| zi jest perpener zire jame or miniculing i | J = | ,) | | -,,, | · · · · · · · · · · · · · · · · · | | | |

IDENTITY & STATEMENT OF EDUCATIONAL PURPOSE

The student must complete **ONE** of the following tasks:

- 1. Appear in person at Huntsville Bible College to verify his/her identity by:
 - a. Presenting a valid government-issued photo identification (ID), such as, but not limited to: a driver's license, other state-issued ID, or U. S. passport, and
 - b. Sign, in the presence of a certified institutional official, the Statement of Educational Purpose below.

OR

- 2. If the student is unable to appear in person at Huntsville Bible College to verify his/her identity, the student must provide the following:
 - a. A copy of 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 U.S. passport; and
 - b. The original notarized Statement of Educational Purpose.

| 7. STATEMENT OF EDUCATIONAL PURPO | OSE Sign in the | e presence of an HBC official or a Notary Public |
|---|------------------------|--|
| I certify that I | e I may receive | n the individual signing this Statement of Educational will only be used for educational purposes and to pay the |
| Student Signature | Date | Name of Institutionally Authorized Individual Reviewing ID Date |
| 8. NOTARY'S CERTIFICATE OF ACKNOWLED | OGEMENT (con | mplete notarization only if submitting this form by mail) |
| State of | | |
| City/County of | | - |
| On, before me, | Notary's Nar | , personally appeared, |
| Printed name of the signer | , and provided to | o me on a basis of satisfactory evidence of identification |
| Type of Government-issued photo ID provided | _ to be the above | e-named person who signed the foregoing instrument. |
| WITNESS my hand and official seal | | |
| Seal | | Notary Signature |
| My commission expires on | | |