

2023-2024 Independent Verification Worksheet

Student's Name _____ Student's ID Number _____

Address _____ Phone _____

1. Number of Household Members: List below the people in the student's household. Include:

▪ The student.

Full Name	Age	Relationship	College Attended at least half-time during 2023-2024 school year (if any)
		<i>Self</i>	<i>Indian Hills Community College</i>

▪ The student's spouse, if the student is married.

Full Name	Age	Relationship	College Attended at least half-time during 2023-2024 school year (if any)

▪ The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2023, through June 30, 2024, even if a child does not live with the student.

▪ Other people if they now live with the student and the student or spouse provides more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2024.

▪ List the name of the college for 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.

Full Name	Age	Relationship	College Attended at least half-time during 2023-2024 school year (if any)

2. Did you attend a college other than IHCC during the 2023-2024 school year? Yes No

3. Did you file or will you file a 2021 income tax return? Yes No*

*Submit a 2023-2024 Student NonTax Filers Form, provide copies of all 2021 IRS W-2 forms issued by employers, and submit an IRS Verification of Nonfiling Letter. Print or download at <https://www.irs.gov/individuals/get-transcript>

4. Did your spouse file or will they file a 2021 income tax return? Not Applicable Yes No*

*Submit a 2023-2024 Student NonTax Filers Form, provide copies of all 2021 IRS W-2 forms issued by employers, and submit an IRS Verification of Nonfiling Letter. Print or download at <https://www.irs.gov/individuals/get-transcript>

5. Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct.
Electronic signatures will not be accepted.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

 Student's Signature (Required)

 Date

Please return this completed form to Indian Hills Community College along with any other requested materials:
 Mail: IHCC Financial Aid Office, 525 Grandview Ave, Ottumwa IA 52501
 or bring to One Stop/Bennett Student Services Building

You can check your financial aid document status, print required forms, and view your financial aid award information (once available) on WIN Dashboard.