



Southeastern Illinois College Financial Aid Office 3575 College Rd. Harrisburg, IL 62946

Phone: (618) 252-5400 Fax: (618) 252-3062

Email: fao@sic.edu

2022-2023 Aggregate Verification Independent

Your application was selected for review in a process called 'Verification'. In this process, the Financial Aid Office will be comparing information from your FAFSA with your 2020 IRS Tax Transcripts. The law authorizes us to ask you for this information before awarding federal aid. If there are differences between your application information and your financial documents, the Financial Aid Office may send corrections electronically to have your information reprocessed. Complete verification as soon as possible so your financial aid will not be delayed.

	WH	AT YOU WILL NEED:				
 □ SIGNED 2020 Student's (and spouse's if applicable) IRS Tax Transcript (unless DRT is successfully used) and any accompanying W2's and/or Schedules □ 2022-2023 Independent Verification Worksheet (Must be signed) □ Proof of Illinois residency (if applicable) Section A- Student Information						
Section 11 State						
	70					
Last Name	First Name	M.I	Student ID Number			
Address			Date of Birth			
City	State	Zip Code	Phone Number			

Section B- Family Information

List the people that you will support between **July 1, 2022** and **June 30, 2023**. <u>Include yourself, your children, and others who live</u> <u>with you and for whom you provide more than half of their support.</u> Also, write the name of the college for anyone listed who will be attending at least half-time between **July 1, 2022** and **June 30, 2023**, and will be enrolled in a degree or certificate program. Use a separate page if needed.

Full Name	Age	Relationship	College
		Self	

Section C- Student's Income Information			
Did you file a 2020 Federal Tax Return? YES NO If IRS	S Data Retrieval Tool was unsuccessful, attach IRS Tax Transcript		
If no, did you receive a W-2 from any employer for 2020?	If yes, attach W2's.		
☐ Check here if you will not file and are not required to file a 2020 U.S. Income	Tax Return.		
☐ Check here if self-employed			
Income earned from work: Use the W-2 or other earnings staten	nents (NON TAX FILERS ONLY)		
Employer	Amount		
	\$		
	\$		
Section D- Spouse's Income Information			
	ta Patriaval Tool was unsuccessful attach IDS Tay Transcript		
Did your spouse file a 2020 Federal Tax Return? YES NO If IRS Data Retrieval Tool was unsuccessful, attach IRS Tax Transcript If no, did your spouse receive a W-2 from any employer for 2020? YES NO If yes, attach W2's.			
Check here if you will not file and are not required to file a 2020 U.S. Income			
Check here if spouse is self-employed.	Tax Return.		
Check here it spouse is sent employed.			
Income earned from work: Use the W-2 or other earnings staten	nents (NON TAX FILERS ONLY)		
Employer	Amount		
	\$		
	\$		
Section E- Statement of Educational Purpose			
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The student must appear in person at Southeastern Illinois College to verify his or issued photo identification (ID), such as, but not limited to, a driver's license, other maintain a copy of the student's photo ID that is annotated with the date it was recauthorized to collect the student's ID.	er state-issued ID, or passport. The institution will		
If the student is not submitting this paperwork to the Financial Aid Office in person presence of a Notary Public.	on, this section must be completed and signed in the		
In addition, the student must sign, in the presence of the institutional official or No	otary Public, the following:		
Statement of Educational P	urpose		
ertify that I am the individual signing this Statement of Educational Purpose and the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending utheastern Illinois College for 2022-2023.			

Financial Aid Officer Name Printed		Financial Aid Officer Title		
Financial Aid Officer Signature		Date		
To be completed by a Notary Publ	ic if submitting by mail:			
	Notary's Certificate of	Acknowledgement		
State of				
City/County of				
On	, before me,	Notary's name		
personally appeared	Printed name o	, and provided to me		
		Type of government-issued photo ID provided		
to be	the above-named person who s	igned the foregoing instrument.		
	WITNESS my hand	and official seal		
	Notary sign	nature		
N	1y commission expires on	Date		
	Seal			
Section F – Signatures R	equired			
By signing this worksheet, we certify	y that all the information reported	to qualify for Federal Student Aid is complete and correct.		
Student	Date	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.		

Date

To be completed by Financial Aid Officer is submitting in person:

Spouse (optional)