

## 2025-2026 VERIFICATION STATEMENT - DEPENDENT

Student's Last Name                      Student's First Name                      M.I.                      Oxy ID or Last 4 Digits of SSN

The U.S. Department of Education randomly selects FAFSAs for a review process called "verification." This process requires the Office of Financial Aid to collect documentation from you and/or your contributor(s) to ensure that the information submitted on your FAFSA® is correct. To meet this requirement, please submit this form along with any requested income documents.

### FAMILY SIZE INFORMATION

Family size includes the following:

- **THE STUDENT**
- **THE STUDENT'S PARENTS (OR STEPPARENT, IF APPLICABLE)**, even if the student is not living with them. Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces apart from the family.
- **THE STUDENT'S SIBLINGS, IF ALL OF THE FOLLOWING ARE TRUE:**
  - They live with the student's parents (or live apart because of college enrollment);
  - They receive more than half of their support from the student's parents; **AND**
  - They will continue to receive more than half of their support from the student's parents during the award year.
- **OTHER PERSONS, IF ALL OF THE FOLLOWING ARE TRUE:**
  - They will live with the student's parents;
  - They will receive more than half of their support from the student's parents; **AND**
  - They will continue to receive more than half of their support from the student's parents during the award year.

**PROVIDE ALL REQUESTED INFORMATION FOR EACH PERSON YOU LIST IN THE TABLE BELOW.**

FULL NAME	AGE	RELATIONSHIP	NAME OF COLLEGE	UNDERGRADUATE/ GRADUATE	ENROLLMENT	EXPECTED GRAD DATE MM/YYYY
		<input type="checkbox"/> Self		<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Not in College	<input type="checkbox"/> Full-time <input type="checkbox"/> Half-time	
		<input type="checkbox"/> Parent/Stepparent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Student's Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Other		<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Not in College	<input type="checkbox"/> Full-time <input type="checkbox"/> Half-time	
		<input type="checkbox"/> Parent/Stepparent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Student's Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Other		<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Not in College	<input type="checkbox"/> Full-time <input type="checkbox"/> Half-time	

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FULL NAME	AGE	RELATIONSHIP	NAME OF COLLEGE	UNDERGRADUATE/ GRADUATE	ENROLLMENT	EXPECTED GRAD DATE MM/YYYY
		<input type="checkbox"/> Parent/Stepparent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Student's Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Other		<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Not in College	<input type="checkbox"/> Full-time <input type="checkbox"/> Half-time	
		<input type="checkbox"/> Parent/Stepparent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Student's Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Other		<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Not in College	<input type="checkbox"/> Full-time <input type="checkbox"/> Half-time	
		<input type="checkbox"/> Parent/Stepparent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Student's Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Other		<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Not in College	<input type="checkbox"/> Full-time <input type="checkbox"/> Half-time	
		<input type="checkbox"/> Parent/Stepparent <input type="checkbox"/> Sibling <input type="checkbox"/> Spouse <input type="checkbox"/> Student's Child <input type="checkbox"/> Grandparent <input type="checkbox"/> Other		<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate <input type="checkbox"/> Not in College	<input type="checkbox"/> Full-time <input type="checkbox"/> Half-time	

### STUDENT'S TAX FILING STATUS – CALENDAR YEAR 2023

Did you file, or were you required to file, a 2023 U.S. Federal Tax Return or Foreign National Tax Return?

- YES**. Please review your required documents on your student portal and submit any outstanding tax forms via IDOC.
- NO**, but I did have earnings from work in 2023. Submit a **Student Non-Tax Filer's Statement** via IDOC. The form is available on your student portal.
- NO**, and I had no earnings from work in 2023. Submit a **Student Non-Tax Filer's Statement** via IDOC. The form is available on your student portal.

### PARENT(S)' TAX FILING STATUS – CALENDAR YEAR 2023

Did your parent(s) file, or were they required to file, a 2023 U.S. Federal Tax Return or Foreign National Tax Return?

- YES**. Please review the required documents on your student portal and submit any outstanding tax forms via IDOC.
- NO**, but they did have earnings from work in 2023. Submit a **Parent Non-Tax Filer's Statement** via IDOC. The form is available on your student portal.
- NO**, and they had no earnings from work in 2023. Submit a **Parent Non-Tax Filer's Statement** via IDOC. The form is available on your student portal.

### CERTIFICATION AND SIGNATURES

Each person signing below certifies that all of the verification documents submitted with this certification are complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

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

**PLEASE NOTE THAT OUR OFFICE IS UNABLE TO ACCEPT DIGITAL SIGNATURES. PLEASE PRINT, SIGN (WET SIGNATURE) AND UPLOAD YOUR COMPLETED FORM VIA IDOC.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date