

FAO Use Only: Dep Ind

Financial Aid Office P.O. Box 501250; Saipan MP, 96950 (670) 237-6790 fao@marianas.edu

Northern Marianas College Financial Aid Office

Your application for federal financial aid was selected for review in a process called "VERIFICATION" which requires that we compare information from your FAFSA with signed copies of your Federal tax forms, W-2 forms and/or other financial documents. If there are differences between your application and your financial documents, corrections will need to be made to your application and your information will be reprocessed.

You must complete and sign this worksheet and submit it along with any documents requested below. **FAO is unable to continue processing your financial aid application or award financial aid until verification has been completed.** Contact the Financial Aid Office if you need assistance. Do not leave any space blank. If an item does not apply to you, enter zero.

st Name	First Name	M.I		Suffix	Student ID N	Student ID Number	
ailing Address	HOLD INFORMATION	City	State	Zip	Date of Birth	Phone Number	
nclude the following: yourself and your pare your parents' other chi support from July 1, 20 required to provide pare and other people if they no than half of their support	ENTS: List the people in nt(s) you live with (including sldren, if (a) your parents prov 24 through June 30, 2025, or ntal information when applying whive with your parents, and the tand will continue to provide 24 through June 30, 2025.	stepparent), and ide more than here (b) the childreng for Federal Strangers	d lalf of their n would be tudent Aid, ovide more	include the for yourself and your children, July 1, 2024 the and other people their support ar	NT STUDENTS: List peo ollowing: your spouse, if married, if you provide more than half rough June 30, 2025, if they now live with you, and y nd will continue to provide mor 24 through June 30, 2025.	of their support from ou provide more than half	
Full Name		Age	Relatio	nship	College currently attending or will atten least half-time between 7/1/2024 and 6/30/2025		
1.				LF			
2.							
3.							
4.							
5.							
6.							
7.							
8.							
STUDENT'S (AN	D SPOUSE'S) TAX FO	RMS AND	INCOME INFOR	MATION			
1. Please check one	•				T REQUIRED to file a 2022 10	40 Tax Return. (See No. 2 he)	



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	2 1040 Tax attached. Parents w	vill NOT file and are NOT REQU	IIRED to file a 2022 1040 Tax. (See No. 2	below)		
	s) did not file and are not required		list below your parent(s)' emp		ncome received in 20	
Sources (Use the W-2 form or other earnings statement) 2022 amount						
		UNTAXED	INCOME			
		CALENDAR				
Parent (s)		-	-	Studer	nt (and Spouse)	
\$	Child Support RECEIVED for a	ıll children. Don't inclu	de foster care or adoption pa	yments	\$	
ċ	Housing, food, and other living allowance paid to members of the military, clergy, and				\$	
\$		others (including cash payments and cash value of benefits).				
	Any other untaxed income or benefits not reported elsewhere, such as worker's compensation, disability, etc. Also include first time homebuyer tax credit from IRS form 1040 line 67.					
\$	Don't include student aid, W	\$				
	benefits from flexible spending arrangements, e.g. Cafeteria Plans, Social Security Benefits,					
	SSI, Welfare payments. Money received, or any paid o					
\$			•	15 101111.	\$	
	A		CIAL INFORMATION			
arent (s)		CALENDAR	1EAR 2022	Studer	nt (and Spouse)	
	Child Support PAID because of					
\$	your (or your parents') house	\$				
If Child Support Paid:	Paid to (Parent's Name) :					
If Child Support Paid:	Paid for (Child (ren) Name) :					
\$	Taxable earnings from Federa	\$				
\$	Student grant, scholarship, fell	\$				
Ψ	reported to the IRS in your (or your parents') adjusted gross income. Earnings from work under a cooperative education program offered by the college				\$	
\$ \$						