

Office of Student Financial Aid 600 S. Paulina St. Suite 440 | Chicago, IL 60612 Telephone: 312-942-6256 | financial_aid@rush.edu

2024-2025 Aggregate Verification Worksheet | Independent Student

Student First Name:	Student ID #:	
Student Last Name:		
A. Certification and Signatures		
discrepancy, I (student) understand that correction	ete and correct. If during the review process, the Office of Student Financial Aid as to my FAFSA will be submitted directly to the U.S. Department of Education or result in an adjustment to my financial aid package that I have been offered.	
Please print and sign the completed form.		
Student Signature:	Date:	

B. FAMILY SIZE

List the people in student's household. Include:

- The student.
- The student's spouse (if applicable),
- The student's dependent children, if the children now live with the student and will continue to receive more than half of their support from the student from July 1, 2024, through June 30, 2025.
- Other people if they now live with the student and will continue to receive more than half of their support from the student from July 1, 2024, through June 30, 2025.

If more space is needed, provide a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship	
		Self	

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□ I (student) have not yet used the Future Act Direct Data Exchange in FAFSA on the Web to transfer 2022 IRS income information but will use the tool to transfer 2022 IRS income tax return information into the student's FAFSA. □ I (student) was unable to the Future Act Direct Data Exchange in FAFSA on the Web to transfer 2022 IRS income to information and instead will submit the 2022 IRS Tax Return Transcript or a signed copy of the 2022 tax return and such as schedules. □ I (the student) was not employed in had no income from work in 2022. □ I (the student) was employed in 2022 but am not required to file a 2022 Income Tax Return with the IRS. □ I (the student) was employed in 2022 but one of the following applies to myself or my spouse: 1) earned income in country, 2) worked for an international organization in 2022 without being required to report income on any tax retaction and the IRS dated on or after October 1, 2023. □ I (the student) have one of the following unusual circumstances: 1) granted a filing extension by the IRS, or 2) amount income tax return for 2022, or 3) a victim of identity theft. Please contact the financial aid office for what tax inform required. Please complete the following table for the student's income if the student was employed in 2022 but was not required income Tax Return with the IRS. Part B. Student/Spouse Wage Information Employer's Name IRS W-2 Provided? Annual Amount Earn	tax return applicable in a foreign turn, or 3) filed a ithority other ended my nation is
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Employer's Name IRS W-2 Provided? Annual Amount Earn	
1 /	
(Example) ABC's Auto Body Yes \$4500	ned in 2022
Student Verification of non-filing status (if applicable)	
Please provide a signed and dated statement certifying that the individual has not filed and is not required to file a 2022	2 income tax
return, as well as the sources of 2022 income earned from work and the amount of income from each source, and resou	
supported the individual for the tax year.	arces that
Check here if a non-filing statement is signed and dated and attached	urces that
Check here if a non-filing statement will be provided later (verification cannot be completed until this is received)	urces that

Student Name: _____StudentID #: _____

Student Name:	StudentID #:		
D. DOCUMENTATION OF IDENTITY/ STATEMENT OF EDUCATIONAL P	URPOSE		
Identity and Statement of Educational Purpose (To Be Signed at the Institution)			
The student must appear in person at	to		
(Name of Postsecondary Education	nal Institution)		
verify his or her identity by presenting an unexpired valid government-issued protection not limited to, a driver's license, other state-issued ID, or passport. The institution student's photo ID that is annotated by the institution with the date it was record the official at the institution authorized to receive and review the student's	ition will maintain a copy of the eived and reviewed, and the name		
In addition, the student must sign, in the presence of the institutional official, t Purpose provided below.	the Statement of Educational		
Identity and Statement of Educational Purpo	ose		
(To Be Signed in the Presence of a Notary)		
If the student is unable to appear in person at			
Name of Postsecondary Education	nal Institution)		

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other stateissued ID, or passport; and
- (b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Student Name:	StudentID #:
DOCUMENTATION OF IDENTITY/ STATEMENT OF EDU	ICATIONAL PURPOSE (Continued from previous page)
Statement of Educa	ational Purpose
I certify that I(Print Student's Name)	_ am the individual signing
this Statement of Educational Purpose and that the Federal I may receive will only be used for educational purposes and (Name of Postsecondary Educational Institution)	to pay the cost of attending
(Student's Signature)	(Date)
(Student's ID Number)	
Notary's Certificate of A Notary's certification	may vary by State
State of	
City/County of	
On, before me,(No	otary's name)
personally appeared,(Printed name of signer)	, and proved to me
on the basis of satisfactory evidence of identification(Type of unexpi to be the above-named person who signed the foregoing install.	red government-issued photo ID provided)
WITNESS my hand and official seal	
(seal)	
(Notary signature)	

My commission expires on _____

(Date)