



Coyote ID:

\*\*A student is independent if he/she is not required to

provide parental information on the FAFSA.

## 2023-2024 Aggregate Verification Worksheet - V5

Complete tl	nis verificatio	on form and	l submit it as	soon as	possible.	The Office	of Financial	Aid and	Scholarships (	cannot
determine y	our award v	vithout this	information.	Please of	complete	<b>ALL</b> section	ons.			

Phone:
Independent Student**
List the people in your household including:
■ Yourself.
<ul><li>Your spouse, if married.</li></ul>
<ul> <li>Your children, if (a) you will provide more than half of</li> </ul>
their support from July 1, 2023, through June 30,
2024(even if they do not live with you) or (b) if the child
would be required to provide your information, as their
parent, if they were applying for Federal Student Aid.
<ul> <li>Other people if they now live with you, you provide</li> </ul>
more than half of their support and will continue to
provide more than half of their support from July 1,
2023, through June 30, 2024.

## \*A student is dependent if he/she was required to provide parental information on the FAFSA.

and will continue to provide more than half of their support from July 1, 2023, through June 30, 2024.

Name:

## **Section A: Family Information**

Full Name	Age	Relationship to Student	College
		Self (student)	CSUSB

Note: Include the name of the college for any household member, excluding your parent(s), who will be enrolled at least half time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2023 and June 30, 2024. If more space is needed, attach a separate page with your name and Student ID Number at the top.

## Parent 2021 Tax & Income Information (Check ONE box only): Tax Filers ☐ The IRS Data Retrieval Tool was used to transfer my income information to the FAFSA. ☐ I have attached a copy of my 2021 Federal Tax Transcript or 1040 Federal Tax Return and any applicable Schedules (1, 2 and/or 3). Copies must be signed and/or have the PTIN number to be accepted. (https://www.irs.gov/individuals/get-transcript) **Non-Filers** ☐ I will not and am not required to file a 2021 U.S. Income Tax Return and have attached all 2021 W-2 form(s). ☐ I was not employed and did not earn income in 2021 and have attached Verification of Non-Filing form to confirm my non-filing status. Student 2021 Tax & Income Information (Check ONE box only): **Tax Filers** ☐ The IRS Data Retrieval Tool was used to transfer my income information to the FAFSA. I have attached a copy of my 2021 Federal Tax Transcript or 1040 Federal Tax Return and any applicable Schedules (1, 2 and/or 3). Copies must be signed and/or have the PTIN number to be accepted. (https://www.irs.gov/individuals/get-transcript) **Non-Filers** I will not and am not required to file a 2021 U.S. Income Tax Return and have attached all 2021 W-2 form(s). I was not employed and did not earn income in 2021. **Section C: Independent Student** Student (and Spouse) 2021 Tax & Income Information (Check ONE box only) **Tax Filers** The IRS Data Retrieval Tool was used to transfer my income information to the FAFSA. ☐ I have attached a copy of my 2021 Federal Tax Transcript or 1040 Federal Tax Return and any applicable Schedules (1, 2 and/or 3). Copies must be signed and/or have the PTIN number to be accepted. (https://www.irs.gov/individuals/get-transcript) **Non-Filers** ☐ I will not and am not required to file a 2021 U.S. Income Tax Return and have attached all 2021 W-2 form(s). I was not employed and did not earn income in 2021 and have attached Verification of Non-Filing form to confirm

**Section B: Dependent Student** 

my non-filing status.

<u>Se</u>	ction E: Identity Verification								
	I am appearing in person with my val passport).	lid government issued photo ic	dentification (driver's license, state ID or						
	I am attaching a notarized copy of my valid government issued photo identification (driver's license, state ID or passport) along with the Identity and Statement of Educational Purpose form. (Please see Notary's Certificate of Acknowledgement on next page)								
Se	ction F: Statement of Educational Pu	<u>ırpose</u>							
	I am appearing in person to sign the statement below (must be signed in front of the Office of Financial Aid and Scholarship Staff).								
	I certify that I,, am the individual signing the Statement of Educational Purpose and that the federal student aid financial assistance I may receive will only be used from educational purposes while attending California State University, San Bernardino for 2023-2024.								
	(Student's Signature)	(Date)	ate)						
	☐ I am unable to appear in person. I am attaching a notarized copy of the Identity and Statement of Educational Purpose form. (Please see Notary's Certificate of Acknowledgement on next page)  NOTARY CERTIFICATION (Complete only if UNABLE to submit this release in person):								
	State of	•	• •						
	State of	Journey of	Date						
	before me,Name, Title of Office	Personally appe	earedName of Signer						
	[] Personally known to me - OR - [] proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that she/he executed the same in her/his authorized capacity, and that by her/his signature on the instrument the person executed the instrument.  WITNESS my hand and official seal.								
Signature of Notary or Office of Financial Aid & Scholarships Member Staff									
	ch person signing this worksheet certifi dent and one parent must sign and dat	•	d is complete and correct. If dependent,	the					
Stu	ident Signature:		Date:	_					
Pa	rent's Signature:		Date:	_					
		Internal Use Only:							
		the type of Identification co	for the student, and a copy of the pho ollected, the staff members' name, ar						
	0								
	Staff Member Name		Date						