



Financial Aid Office
360 Choate Avenue
Buffalo, NY 14220
716.826.1200

First Name: _____ Last Name: _____ Student ID: _____

Instructions

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your spouse (if married) reported on your FAFSA. To verify that you provided correct information Trocaire College will compare your FAFSA with the information on this worksheet and with any other required documents. You must complete and sign this worksheet, attach any required documents, and return to the Trocaire Financial Aid Office.

Section 1: Household Verification

List ALL individuals in your household, including:

- 1. Yourself and your spouse (if married).
2. Your children if you provide more than half of their support from July 1, 2023 through June 30, 2024.
3. Other people who live with you if you currently provide 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.

Write the names of all household members in the space below along with the name of the college for any household member who will be enrolled at least half-time between July 1, 2023 and June 30, 2024 in a degree, diploma, or certificate program at an eligible postsecondary institution.

Table with 4 columns: Full Name, Age, Relationship, College. Row 1: Self, Trocaire College. Rows 2-8: Empty.

Section 2: Certification and Signature - Please handwritten your signature. Typed Signatures cannot be accepted.

I certify that all information provided in this document is true, complete and accurate to the best of my knowledge. I further understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid. Also, purposely giving false or misleading information on this worksheet may lead to fines, jail sentences, or both. I authorize Trocaire College to make any change(s) necessary as a result of the updated information that I have provided.

Student Signature (Cannot be typed) Date Spouse Signature (if married) Date