

Financial Aid Office 360 Choate Avenue Buffalo, NY 14220 716.826.1200

First Name:	Last Name:	Student ID:				
The law says that before awardir (if married) reported on your FAF	ng Federal Student Aid, we r SA. To verify that you provinis worksheet and with any c	AFSA) was selected for review in a processmay ask you to confirm the information you ded correct information Trocaire College worther required documents. You must competer the Financial Aid Office.	u and your spouse will compare your			
Section 1: Tax Status and	ncome Information					
Place an X next to the statement that best represents your 2021 tax filing status and complete the corresponding instructions below. Indicate spouse status only if you were married on the date you submitted your FAFSA and filed separate 2021 tax returns.						
Student		Spouse				
Did you file a 2021 Federal I (You must check one box belonequested documents.)		Did you file a 2021 Federal Income (You must check one box below and requested documents.)				
☐ <b>YES</b> – I used the IRS Data FAFSA (no documentation re		☐ <b>YES</b> – I used the IRS Data Retrie FAFSA (no documentation required)				
☐ <b>YES</b> – I have enclosed a structure (including schedulapplicable) or my 2021 IRS have amended your tax returns the amended return as well at Transcript.	ules 1, 2 or 3 if Fax Transcript. If you rn, please submit <u>both</u>	☐ YES – I have enclosed a signed 2021 Tax Return (including schedule applicable) or my 2021 IRS Tax Trainave amended your tax return, please the amended return as well as an IR Transcript.	es 1, 2 or 3 if nscript. If you se submit <u>both</u>			
□ NO – I did not earn any ir 2021. I have enclosed an IR Filing Letter.		□ NO – I did not earn any income fi 2021. I have enclosed an IRS Verific Filing Letter.				
□ NO – I did not file a 2021 I did earn wages from the en have enclosed copies of my each employer and an IRS V Letter.	nployer(s) listed below. I W-2 statements from	□ NO – I did not file a 2021 Federa I did earn wages from the employer(have enclosed copies of my W-2 staeach employer and an IRS Verificati Letter.	s) listed below. I tements from			
Employer	Amount Earned	Employer Ar	mount Earned			



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## **Section 2: 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.

Full Name	Age	Relationship	College
		Self	Trocaire College



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## **Part 2: Instructions**

You must verify your identity in person at the Enrollment Center before your financial aid can disburse. You must provide a valid, original government issued photo identification, such as, but not limited to, a driver's license, passport, or other state-issued ID. Trocaire College will take a photocopy of your ID and you can complete section 3 at this time. If you have an extenuating circumstance and cannot come to campus, you may complete section 3 and 4 with a notary.

I certify that I,	(Prin	t Student Name)	, am the individual signing this udent Name)		
Statement of Educ	cational Purpose an	d that the federal	student financial assistance I may receive will on tending Trocaire College for the 2023-2024 acad		
Student Signature	e:(Cannot b	e typed)	Date:		
Financial Aid Adm	ninistrator's Signatur	e:	Date:		
Section 4: Not A	Appearing at Troca	ire College – No	tary's Certificate of Acknowledgement		
You must	attach a legible photo	copy of the front	and back of ID presented in notary statement below	' <b>.</b>	
State of	City/County of				
On	, before me, _		personally appeared,		
(Date)		(Notar	r's name) ed to me on basis of satisfactory evidence of		
(Printed Stude		, and provide	a to the off basis of satisfactory evidence of		
	e of Govt Issued Photo ID)		ve name person who signed the forgoing instrument.		
WITNESS my hand and official seal			Notary Signature:		
(seal)			My Commission expires on:		
			vrite your signature. Typed Signatures cannot be acceptrue, complete and accurate to the best of my	ted.	
knowledge. I furth withdrawal, and/o worksheet may lea	er understand that a r repayment of finan	iny false stateme cial aid. Also, pur ences, or both. I a	nt or misrepresentation will be cause for denial, re posely giving false or misleading information on t uthorize Trocaire College to make any change(s)	his	
Student Signature (Ca	annot be typed)	Date	Spouse Signature (if married)	Date	