

# Financial Aid Office Verification (V5) Worksheet

OFFICE OF FINANCIAL AID  
1600 CHESTER AVENUE  
BREMERTON, WA 98337-1699  
PHONE: (360) 475-7279

### A. Student Information

(NOTE: A student is considered dependent if he/she was required to provide parental information on the FAFSA)

Last Name	First Name	MI	ctcLink ID (SID)
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Date of birth	Phone number	Social Security Number
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Dependency Status:      Dependent                      Independent

## B. Family Household Information

Provide information on individuals within your “household.” The definitions table will let you know who should be listed. *If more space is needed, list them on an attached page with your name and Social Security Number at the top.*

<b>Definitions</b> <i>(the financial aid award year starts June 1<sup>st</sup>, 2025, and ends May 30<sup>th</sup>, 2026)</i>	
<b>Dependent Student</b>	<b>Independent Student</b>
Yourself	Yourself
Your parent(s) listed on your FAFSA, regardless of whether you live with them	Your spouse, if you are married
Your parent(s)' children, for whom they will provide more than half of their financial support during this financial aid award year	Your children, for whom you will provide more than half of their financial support during this financial aid award year
Other individuals living with your parents, for whom your parent(s) will provide more than half of their financial support during this financial aid award year	Other individuals living with you, for whom you'll provide more than half of their financial support during this financial aid award year
Exclude Foster Children	

[illegible]

[illegible][illegible]

## E. Student – Identity Verification

(NOTE: Federal law prohibits copying military ID, therefore we cannot accept military ID)

You will need to provide a valid, unexpired government-issued photo identification to verify your identity with the financial aid department. Let us know how you will provide this document.

Check only one box below:

I am appearing in person with valid identification

I am appearing over a video call with valid identification

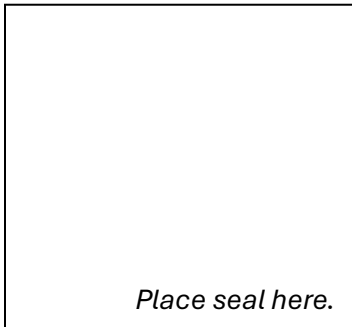
I am proving my identity by having this statement notarized with an embossed stamp

I have provided identity verification issued by the institution where I am currently confined or incarcerated

### NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT

SUBSCRIBED AND SWORN before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

I certify that I know or have satisfactory evidence that (name of person)\_\_\_\_\_ is the person who appeared before me, and said person acknowledged that (he/she) signed the Statement of Educational Purpose and acknowledged it to be (his/her) free and voluntary act for the use and purpose mentioned in this instrument.



\_\_\_\_\_(signed)  
Notary Public in and for the State of \_\_\_\_\_

\_\_\_\_\_(Print)  
Notary Public in and for the State of \_\_\_\_\_

\_\_\_\_\_  
My Commission expiration date

## F. Sign the Worksheet

**Student/Parent Certification Statement: By submitting this form, I certify that all the information above is complete and correct.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature (DEPENDENT)

\_\_\_\_\_  
Date