

INDEPENDENT VERIFICATION WORKSHEET - V5 2025-2026

FEDERAL STUDENT AID PROGRAMS

SEND ALL PAPERWORK TO:

Southeast Technical College
Office of Financial Aid
2320 N Career Ave

Fax: 605-367-8305 **Phone:** 605-367-7867

Email: financialaid@southeasttech.edu

A. Student Info	rillation				
_ast Name	First Name	M	1.1.	Student ID# or Social Security Number	
Address (include Apt No.)				Phone Number	
City	State	Z	/ip	Email	
B. Please identif	y the people in your hous	sehold, includ	le:		
Number in Hous	sehold on FAFSA:		Please list those people in this section.		
2026, even • Other peop	en if you will provide mo if they do not live with yole if they now live with y	you, you, you prov	vide more	pport between July 1, 2025, and June 30, than half of their support and you will	
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Your spous Your childred 2026, even Other people continue to Name (First & C. Please identifications between	en if you will provide mo if they do not live with yo le if they now live with yo provide more than half Last) ify the people listed in teen July 1, 2025, and June	you, you, you prov of their supp Age the above house 30, 2026,	Relation Student usehold w and will i	than half of their support and you will een July 1, 2025, and June 30, 2026. nship t/Self who will be attending college at least be in a degree or certificate program.	

D. Refer to the enclosed sheet for detailed instructions regarding tax information requested, then complete and sign the back of this form.

E. Student: Did you file a 2023 U.S. Federal Tax Return?

IF YES: Choose One	IF NO: Choose One				
☐ I successfully used the Link to IRS tax information.	☐ I did not earn income during 2023 and I was not required to file a 2023 Federal Tax Return.				
Attached is a copy of my 2023 Federal tax return (signed) OR 2023	☐ I was not required to file a 2023 Federal Tax Return but did earn income during 2023. Attached are my 2023 W-2s OR my 2023 IRS Wage and Income Transcript.				
IRS Tax Return Transcript.	NON-FILERS ONLY List the Names of ALL Employers	Enter the Amount Earned from each Employer in 2023	W-2 Attached? (circle one)		
IRS Tax Return Transcript and will submit it when it			☐ Yes ☐ No		
is received			☐ Yes ☐ No		
			☐ Yes ☐ No		
F. Spouse (if married): Did you IF YES: Choose One	u file a 2023 U.S. Federal T	IF NO: Choose One			
☐ I successfully used the Link to IRS tax information.	☐ I did not earn income during 2023 and I was not required to file a Federal Tax Return.		ot required to file a 2023		
Attached is a copy of my 2023 Federal tax return (signed) OR 2023	☐ I was not required to file a 2023 Federal Tax Return but did earn income during 2023. Attached are my 2023 W-2s OR my 2023 IRS Wage and Income Transcript.				
IRS Tax Return Transcript. I have ordered my 2023 IRS Tax Return Transcript	NON-FILERS ONLY List the Names of ALL Employers	Enter the Amount Earned from each Employer in 2023	W-2 Attached? (circle one)		
and will submit it when it			☐ Yes ☐ No		
is received			☐ Yes ☐ No		
			☐ Yes ☐ No		

G. Documentation of Identity/Statement of Educational Purpose

sentenced to jail, or both.

This section must be completed either in the presence of Financial Aid Staff or Public Notary. In order to complete the verification process, you will need to appear in person at Southeast Technical College and present your government issued ID (such as a driver's license, military ID, passport) and this verification worksheet to an institutionally authorized Financial Aid staff member. The Financial Aid staff member must validate the statement below at the time of submission by maintaining a copy of your photo ID and by providing a signature and date.

Statement of Education	ai Purpose				
I certify that I,		am the individual signi	am the individual signing this Statement of		
Educational Purpose and	d that the federal student final	ncial assistance I may receiv	e will only be used for		
educational purposes an	d to pay the cost of attending	g Southeast Technical Collec	ge for 2025-2026.		
Student's Signature	lent's Signature Date		Financial Aid Staff's Signature Date		
	person to submit this verificat o ID and this verification work				
Notary's Certificate of K	(nowledge				
State of	City/County of	on	before		
satisfactory evidence of inforegoing instrument.	personally appeared,	to be the above name	ed person who signed the (Date Commission Expires)		
_	ures: SENDING WITHOUT SIGI et, we certify that all informati Date				
WARNING: If you purpo	sely give false or misleading i	nformation on this workshe	et, you may be fined,		