DEPENDENT VERIFICATION WORKSHEET - V5 2026-2027

FEDERAL STUDENT AID PROGRAMS

SEND ALL PAPERWORK TO:

Southeast Technical College
Office of Financial Aid
2320 N Career Ave
Sioux Falls, SD 57107

Fax: 605-367-8305
Phone: 605-367-7867
Email: financialaid@southeasttech.edu

A. Student Information

Last Name _____ First Name _____ M.I. _____ Student ID# or Social Security Number _____

Address (include Apt No.) _____ Phone Number _____

City _____ State _____ Zip _____ Email _____

B. Please identify the people in your parents' household, include your self and your parent(s):

Number in Household on FAFSA: _____ Please list those people in this section.

- If your parent is remarried, include your stepparent.
- If your parents support other people and will continue to provide more than half of their support between July 1, 2026, and June 30, 2027 (such as their other children), include them in the household.
- If your parents' other children would be required to provide parental information when completing the FAFSA, include them in the household.

Name (First & Last)	Age	Relationship
		Student/Self

C. Please identify the people listed in the above household who will be attending college at least half-time between July 1, 2026, and June 30, 2027, and will be in a degree or certificate program.

Number in College on FAFSA: _____ Please list those people in this section.

Name	Name of College/Postsecondary School
Student/Self	Southeast Technical College

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 2024 U.S. Federal Tax Return?

IF YES:
Choose One

- ☐ I successfully used the Link to IRS tax information.
- ☐ Attached is a copy of my 2024 Federal tax return (signed) OR 2024 IRS Tax Return Transcript.
- ☐ I have ordered my 2024 IRS Tax Return Transcript and will submit it when it is received

IF NO:
Choose One

- ☐ I did not earn income during 2024 and I was not required to file a 2024 Federal Tax Return.
- ☐ I was not required to file a 2024 Federal Tax Return but did earn income during 2024. Attached are my 2024 W-2s OR my 2024 IRS Wage and Income Transcript.

NON-FILERS ONLY List the Names of ALL Employers	Enter the Amount Earned from each Employer in 2024	W-2 Attached? (circle one)
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No

F. Parent(s): Did you file a 2024 U.S. Federal Tax Return?

IF YES:
Choose One

- ☐ I successfully used the Link to IRS tax information.
- ☐ Attached is a copy of my 2024 Federal tax return (signed) OR 2024 IRS Tax Return Transcript.
- ☐ I have ordered my 2024 IRS Tax Return Transcript and will submit it when it is received

IF NO:
Choose One

- ☐ I did not earn income during 2024 and I was not required to file a 2024 Federal Tax Return.
- ☐ I was not required to file a 2024 Federal Tax Return but did earn income during 2024. Attached are my 2024 W-2s OR my 2024 IRS Wage and Income Transcript.

NON-FILERS ONLY List the Names of ALL Employers	Enter the Amount Earned from each Employer in 2024	W-2 Attached? (circle one)
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No

G. Documentation of Identity/Statement of Educational Purpose

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 Educational Purpose

I certify that I, _____ (Print Student's Name) am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Southeast Technical College for 2026-2027.

_____ _____
Student's Signature Date Financial Aid Staff's Signature Date

If you cannot appear in person to submit this verification worksheet, you will need to provide a copy of your government issued photo ID and this verification worksheet notarized by a public notary.

Notary's Certificate of Knowledge

State of _____ City/County of _____ on _____ before me, _____ (Printed Notary's Name) personally appeared, _____ (Printed Student's Name) and provided to me on basis of satisfactory evidence of identification _____ (Type of Government Issued Photo ID Provided) to be the above named person who signed the foregoing instrument.

WITNESS my hand and official seal _____ (Notary's Signature) _____ (Date Commission Expires)

(Seal)

H. Certification of signatures: SENDING WITHOUT SIGNATURES WILL DELAY THE FINANCIAL AID PROCESS.

By signing this worksheet, we certify that all information reported on this form to qualify for Federal aid is complete and correct.

_____ _____
Student Date Parent Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.