



INDEPENDENT VERIFICATION WORKSHEET - V1 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 household, include:

Number in Household on FAFSA: _____

Please list those people in this section.

- Yourself,
- Your spouse,
- Your children if you will provide more than half of their support between July 1, 2026, and June 30, 2027, even if they do not live with you,
- Other people if they now live with you, you provide more than half of their support and you will continue to provide more than half of their support between July 1, 2026, and June 30, 2027.

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.

IF YES:
Choose One

- IF NO:**
Choose One

- | 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 |

IF YES:
Choose One

- IF NO:**
Choose One

- | 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 |

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

Date _____

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Updated: November 25, 2025