

## 2025-2026 Verification Worksheet-Tracking Group V5

Your 2025-2026 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information we will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the Financial Aid Office at Baptist Health College. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

A. Student's Information						
Student's Last Name	First Name	M.I.	Student's ID Number			
Student's Street Address (Inc	lude Apt. No)		Student's Date of Birth			
City	State	Zip Code	Student's Email Address			
Student's Home Phone Number	ber (Include Area Code)		Student's Cell Phone Number			

## B. Student's Family Information

If you are <u>DEPENDENT</u> student list below the people your parents will support between July 1, 2025 through June 30, 2026. Include:

- The Student (Yourself), even if you don't live with your parents
- Your Parent(s)-(including step-parents)
- Your Parents other children (even if they don't live with your parent(s), and (A) if your parent(s) will provide more than half of their support or (B) if they would be required to give parental information when applying for Federal Student Aid.)

If you are an **INDEPENDENT** student, include:

- The student (yourself)
- Your spouse (if married)
- Your children, if you will provide more than half of their support from July 1, 2025 through June 30, 2026.
- Other people, (only if they live in your household and you provide more than half of their support and will continue to do so from July 1, 2025 through June 30, 2026.

Student Name			Student ID Number			
В.	B. Student's Family Information (Continued)					
-	ousehold member who will be enrollonal institution any time between July		= :		ible postsecondary	
	Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)	
			SELF	BHCLR	Noy	
	e may require additional documentati			formation regarding the house	nold members enrolled	
- 0 -	, , , , , , , , , , , , , , , , , , , ,					
C.	Student's Income Information	to be Verified	1			
	and your spouse, if married) file a 20		-	nit #2) No. (go to #2	omit #1)	
1.	Tax Return Filers	25 Tax Retain	. 163 (80 to #1) of	(go to "2)	, o	
-	nt Note: If you (or your spouse, if mar er 31, 2024, you must contact the fina				marital status after	
already ι	Instructions: Complete this section ome is by using the IRS Data Retrieval sed the tool, go to www.studentaid.qum there, follow the instructions to details.	l Tool (IRS DRT) <u>ov,</u> select "Mal	that is part of FAFSA on the ke FAFSA Corrections," and	e Web at <u>www.studentaid.qov.</u> navigate to the Financial Inform	If the student has not	
	Check the one that applies:					
informat	I, the student, <u>have used</u> thion into my FAFSA.	e IRS DRT in <i>FA</i>	AFSA on the Web to transfer	my (and, if married, my souse's	s) 2023 IRS tax return	
spouse's	I, the student, <u>have not yet</u> 2023 IRS Tax Return Information into		RT in <i>FAFSA on the Web,</i> bu	it will use the tool to transfer m	y (and, if married, my	
Transcrip	I, the student, am <u>unable</u> to	use the IRS DF	RT in <i>FAFSA on the Web,</i> an	d instead will provide the schoo	l a 2023 IRS Tax Return	
If the stu	dent and spouse filed separate 2023	IRS Income Ta	x Returns, 2023 IRS Tax Ret	turn Transcripts must be provid	ed for each.	
2.	Non-Tax Filers Complete this section if the student	t and spouse <u>w</u>	ill not file and are not requi	<u>red</u> to file a 2023 tax return wit	h the IRS.	
	Check the one that applies:					
	The student (and, if married	d, the student's	s spouse), was not employe	d and had no income earned fro	om work in 2023.	
	The student (and/or the stue earned from each employer in 2023, a ued to the student and spouse, if mar	ind whether an	IRS W-2 form is provided.	•	V-2	

Student Name		Stude	Student ID Number				
	Employer's Name	2023 Amount Earned	IRS W-2 Provided? (Yes or No)				
You mus with the		S dated on or after October 1, 2023 that indica	ites a 2023 IRS Income Tax Return was not filed				
	Check here if confirmation of Non-fili	ng is providedCheck here if confir	mation of Non-filing will be provided later.				
D.	Student's High School Complet						
	Provide one of the following documents to indicate the student's high school completion status when the student begins colle 2025-2026.						
Check one of the documents you will attach to this worksheet:  High School Diploma or High School Transcript including graduation date.  A copy of the student's final official high school transcript that shows the date when the diploma was awarded.							
						ment (GED) Certificate, an official GED transcrip hool equivalent certificate.	t that indicates the student passed the exam, or a
				For students who completed secondary education in a foreign cou or other similar document.			opy of the "secondary school leaving certificate"
	Academic transcript of a su	ccessfully completed two-year program accepta	able for full credit toward a bachelor's degree.				
	If you are a homeschooled student, a transcript or equivalent, signed by parent or guardian, listing secondary school courses you have completed and documentation that you have successfully completed secondary school education.						
	If you are a homeschooled	student, a secondary school completion creden	tial provided under State Law.				

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A student who is unable to obtain the documentation listed above must contact the financial aid office.

Student Name		Student ID Number	
E.	Identity and Statement of Educational	Purpose (To Be Signed at the Institution)	
photo Id the stud	entification (ID), such as, but not limited to, a d	<u>ellege</u> to verify his or her identity by presenting an unexpired valid government-issued lriver's license, other state-issued ID, or passport. The institution will maintain a copy of on with the date it was received and reviewed, and the name of the official at the t's ID.	
In additi	on, the student must sign, in the presence of th	ne intuitional official, the Statement of Educational Purpose provided below.	
	S	Statement of Educational Purpose	
	l certify that l	am the individual signing (Print Student'	
		Name)	
		rpose and that the Federal student financial assistance I may receive will only be used fo y the cost of attending <u>Baptist Health College</u> for the 2025-2026 school year.	
	(Student's Signature)	<del>-</del>	
	(Date)	(Student's ID Number)	
WA		R MISLEADING INFORMATION ON THIS WORKSHEET, YOU MAY BE FINED, SENTENCED TO JAIL, OR BOTH.	
Certific	ations and Signatures		
Each per	son signing this worksheet certifies that all of t	he information reported on it is complete and correct.	
INDEPEN	IDENT STUDENTS: The student must sign and o	date.	
DEPEND	ENT STUDENTS: The student and parent(s) mu	st sign and date.	
		Print Student's Name	
	Student's ID Number	_	
		Student's Signature	
	Date	_	
		Parent's Signature	

Date

Do not Mail this worksheet to the U.S Department of Education.

Submit worksheet to: Baptist Health College, Financial Aid Office, 11900 Colonel Glenn Rd. Little Rock, AR 72210 or fax to: 501-202-7875.

You can also bring completed forms to the Financial Aid Office at address above.