

2025-2026 STANDARD VERIFICATION WORKSHEET (V1, V5) - INDEPENDENT

Federal Student Aid Programs

Your 2025-2026 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called "Verification". In this process your school will be comparing information from your FAFSA with your 2023 federal tax return information (loaded to the FAFSA by using the Future Act Direct Data Exchange) and any other required documents requested either on this worksheet or on Eagle Online under Financial Aid Eligibility / Student Requirements for 2025-2026. Federal law says your school has the right to ask you for this information before awarding federal aid. If there are differences, the school may need to make corrections to your FAFSA. You must complete and sign this worksheet, attach any required documents, and submit to the Tennessee Tech Financial Aid Office. Try to complete verification as soon as possible so that the processing of your financial aid will not be delayed.

Documents may be uploaded through Eagle Online, scanned and emailed to financialaid@tntech.edu, faxed to 931-372-6309, or Mailed to: Tennessee Tech Financial Aid Office, Campus Box 5076, Cookeville, TN 38505

Your school must review the requested information under the financial aid program rules (CFR Title 34, Part 668).

A. STUDENT INFORMATION

| | | | |
|----------------------------|------------|----------|----------------------------------|
| Last Name | First Name | M.I. | Tech ID Number (T#) |
| Address (include apt. no.) | | | Date of Birth |
| City | State | ZIP Code | Phone Number (include area code) |

B. FAMILY INFORMATION

List the people that you (and your spouse) will support between July 1, 2025 and June 30, 2026. Include:

- Yourself
- Your spouse, if you are married
- Your dependent children (if you will provide more than half of their support and will continue to receive support from you from through June 30, 2026 **AND** if they live with you (or live apart because of college enrollment)).

Include other people as part of your family only if:

- They now live with you and get more than half of their support from you (or your spouse) **AND** they will continue to get more than half of their support from you from through June 30, 2026.

Write the names below of all family members described above, including yourself. If you need more space, attach a separate page.

| Full Name | Age & Birthdate | Relationship to Student |
|-----------|-----------------|-------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

C. SIGN THIS WORKSHEET

By signing this worksheet, we certify that all the information reported to qualify for federal student aid is complete and correct.

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

| | | | |
|---------|------|--------|------|
| Student | Date | Spouse | Date |
|---------|------|--------|------|