

2023-2024 V1-VERIFICATION SHEET

LAST NAMELAST 4 DIGITS OF SOCIAL SECURITY NUMBERSTUDENT'S EMAIL ADDRESS				FIRST NAME ANDREWS UNIVERSITY ID NUMBER				
				Verification Explained				
SECTION 1-HOUSEHOL • Need help complete			tion?					
Full names of ALL household members Remember to list yourself first!	Age	Relationship to student	Will he/she be enrolled in a degree program at a college/university at least half-time in 2023-24?		If enrolled, what type of program?		Name of	
					UG	GRAD	college/university	
		Self	☐ Yes	□ No				
			☐ Yes	□ No				
			☐ Yes	□ No				
			☐ Yes	□ No				
			☐ Yes	□ No				
			☐ Yes	□ No				
			☐ Yes	□ No				
SECTION 2-TAX INFO								
Need help completing	ng <u>Tax l</u> ı	nformation?						
> Check the option below that a	pplies to	you (the student) &	& your parent/s	oouse: ONLY ONE	OPTION PE	R STUDENT 8	& PARENT/SPOUSE	
						Stude	ent Parent/Spouse	
A. Have or will use IRS Data Retrieval when completing FAFSA (data was not altered).								
B. Not eligible for IRS Data Retrieval. Will submit 2021 signed copy of federal tax return or tax return transcript.						pt. \square		
C. Did work in 2021 but did not file taxes. I am not required to file a 2021 federal tax return.								
D. Did NOT work in 2021 and did not file taxes. I am not required to file a 2021 federal tax return.								
E. Did NOT file taxes but had inc	ome in 20	21 not reported or	n a W2. Submit 109	99 and/or a signed	statement o	of income. \square		
REQUIRED SIGNATURE(S)								
STUDENT					DATE			
PARENT OF DEPENDENT STUDENT _					DATE			
		Log in to Fina	ncial Aid Self-S	arvica Rannar				
to menitor	2. catic	LUB III LU <u>FIIIal</u> fy any addition:			l offer is s	omplete		

Mail to: Andrews University

Office of Student Financial Services 4150 Administration Drive Berrien Springs, MI 49104-0750 Fax to: 269-471.3228 Phone: 269.471.3334

Web: www.andrews.edu/sfs
Email: sfs@andrews.edu