2026-2027 Dependent Standard Verification Worksheet

Federal Student Aid Programs

Your application was selected for review in a process called "Verification." In this process, the College of Menominee Nation (CMN) will compare information from your FAFSA with this worksheet and the financial documents you will submit. The law states we can ask you for this information before awarding federal aid. If there are differences between your FAFSA application and your financial documents, the College of Menominee Nation may need to make electronic corrections to your FAFSA. Contact the Financial Aid Office at the College of Menominee Nation at (715) 799-6226 ext. 3237 if you have questions about the worksheet.

INSTRUCTIONS

1. Complete all sections of this worksheet **in full.**
2. Submit the completed and signed worksheet and/or any other documents requested to the Financial Aid Office at CMN.
3. Submit 2024 financial documents **(if asked for)**
   a. Submit a copy of your **2024 IRS tax return or transcript(s)—** *To obtain an IRS tax return transcript, go to www.IRS.gov and click on the "Order a Return or Account Transcript" link, or call 1-800-908-9946.*
   b. If not required to submit taxes, provide W-2 forms if applicable.

1. Student Information

Last Name | First Name | M.I. | SSN or Student ID Number

Mailing Address (include apt. no.) | Date of Birth

City | State | ZIP Code | Phone Number (include area code)

2. Number of Family Members

1. List below the number of family members in the household:
   a. Family size includes: The parent (and their spouse), the student, other people, if they now live with the parent and the parent will provide more than half of their support between July 1, 2026, and June 30, 2027. This includes dependent children who meet these criteria, even if they live apart because of college enrollment.

Full Name	Age	Relationship
Marty Jones (example)	28	Wife

**If more space is needed, attach a separate page with your name and Social Security Number at the top*

3. Dependent Student's Information (all applicants) -

1. Check the box that applies:

a. ☐ The student filed/will file a 2024 Federal IRS Tax Return, Puerto Rican, or Foreign Income Tax Return.
b. ☐ The student was not employed, did **not** have income and is not required to file a 2024 Federal IRS Tax Return.
c. ☐ The student was employed and had income, but is not required to file a 2024 Federal IRS Tax Return **and** will list all employer(s) and the amount that was earned in 2024 in the chart below:

NON-TAX FILERS (Complete ONLY if **Box c** is checked):		
Employer's Name	2024 Amount Earned	IRS W-2 Attached?
Suzy's Auto Body Shop (example)	*$2,000.00*	☒
		☐
		☐

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4. Parent(s)' Information

1. Check the box that applies:

a. ☐ Parent(s) filed/will file a 2024 Federal IRS Tax Return, Puerto Rican, or Foreign Income Tax Return.
b. ☐ Parent(s) was not employed, did **not** have income and is not required to file a 2024 Federal IRS Tax Return.
c. ☐ Parent(s) was employed and had income, but am not required to file a 2024 Federal IRS Tax Return **and** will list all employer(s) and the amount that was earned in 2024 in the chart below:

NON-TAX FILERS (Complete ONLY if **Box c** is checked):		
Employer's Name	2024 Amount Earned	IRS W-2 Attached?
Suzy's Auto Body Shop (example)	*$2,000.00*	☒
		☐
		☐

** If more space is needed, attach a separate page with your name and Social Security Number at the top*

5. Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

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

_____ _____
Student's Signature (Required) Date

_____ _____
Parent's Signature (Required) Date

Submit to: College of Menominee Nation
Attn: Financial Aid Office
PO BOX 1179
Keshena, WI 54135
Phone: (715) 799-6226
Fax: (715) 799-5602
Email: financialaid@menominee.edu