

Office of Financial Aid

1570 Baltimore Pike Lincoln University, PA 19352-0999 484-365-5300 phone 484-365-8198 fax financialaid@lincoln.edu

2026-2027 DEPENDENT Verification Worksheet

Verification Group V5

Your Free Application for Federal Student Aid (FAFSA) was selected for review in a process called "Verification".

The following items are required prior to a financial aid award being finalized:

- (1) This completed and signed Verification Worksheet.
- (2) Your 2024 Federal Tax Return Transcript (if Federal Tax Information (FTI) was not utilized), or if applicable, the Statement of Non-Filing in Option 2. Any W-2 or 1099 statements from 2024.
- (3) Your Contributor(s)' 2024 Federal Tax Return Transcript (if IRS Data Retrieval Tool was not utilized), or if applicable, the Statement of Non-Filing in Option 2. Any W-2 or 1099 statements from 2024.

If there are any differences between your FAFSA information and your financial documents, Lincoln University may need to make corrections to your record.

Section A: Student's Information		
Last Name, First Name, M.I.	Student ID Number	
Street Address	Date of Birth	
City, State, Zip Code	Phone Number	

Section B: Dependent Student's Family Information

List below the people in your contributor(s)' household. Include:

- The student.
- The contributor (including a step-contributor)
- The contributors other children if the contributor will provide more than half of the children's support. Other people if they now live with the contributor and the contributors, provide more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2027.

If more space is needed, attach a separate page with the student's name and Student ID Number at the top.

Full Name	Age	Relationship
		Self

Note: We may request additional documentation if we have reason to believe the information is inaccurate.

Student's Name.	· · · · · · · · · · · · · · · · · · ·	Student ID #	
Section C: Student Tax Filing Status fo Please complete Option 1 <i>or</i> Option 2.	r calendar year 2024:		
Option 1: Student filed a 2024 IRS Tax R	eturn: Please select an op	tion below.	
Federal Tax Information (FTI) was	used to file FAFSA or,		
2024 IRS Tax Return Transcript is a click " Get Your Tax Record ".	attached. To obtain an IRS	Tax Return Transcript go to www.	<u>r.irs.gov</u> and
Check here if you had an IRA rollover in space provided	nto another IRA or qualific	ed plan; include the amount report	ted in the
Option 2: Student was a Non-tax Filer for I certify that I did not, and am not required	5	tax return. Please select an option	ı below.
Student was not employed and had	no income earned from w	ork in 2024.	
Student was employed in 2024 but all employers and amount earned in 2024.	did not file a federal tax re	eturn. Complete the table below to	report on
If more space is needed, attach a separate po			_
Employer's Name	2024 Amount Earned	IRS W2 or an Equivalent Document Provided?	
	\$		-
	\$		1
	\$		-
Total Amount of Income Earned from Work		\$	_
Provide a signed and dated statement certi income tax return, as well as the sources of source. Check here if non-filing statement is signed.	2024 income earned fron		
Check here if non-filing statement will			

To request Federal tax information, go to www.irs.gov .

Section D: Contributor Tax Filing Status for calendar year 2024: Please complete Option 1 or Option 2.

Option	1: Contributor(s) filed a 2024 I	RS Tax Return: Please select a	n option below.	
	Federal Tax Information was used to	file the FAFSA <i>or</i> ,		
 click "G	2024 IRS Tax Return Transcript is a Get Your Tax Record".	attached. To obtain an IRS Tax R	eturn Transcript go to <u>www.irs.g</u>	<u>ov</u> and
	eck here if you had an IRA rollover in provided	nto another IRA or qualified plar	ı; include the amount reported ir	n the
I certify	12: Contributor(s) was a Non-taxy that I did not, and am not required IRS Verification of Non-Filing Letter	to file a 2024 U.S. Federal Tax re	eturn. You are required to submi	
	Contributors(s) were not employed	l, and did not earn income from	work in 2024.	
— report	Contributor(s) were employed in 2 all employers and amounts earned i	n 2024. You will need to provid	e copies of your IRS W-2 forms fo	
	If more space is needed, attach a separa Employer's Name	2024 Amount Earned	IRS W2 or an Equivalent	
			Document Provided?	
		\$		
		\$		
		\$		
Total Amount of Income Earned from Work		from Work	\$	
202 fro	ovide a signed and dated statement of 24 income tax return, as well as the sem each source (see above). Check here if non-filing statement in the check here if non-filing statement where the check here if non-filing statement is not check here if non-filing statement where the check here if non-filing statement is not check here if non-filing statement is no check here if non-filing statement is no check here if non-filing statement is not check here if non-filing statement is no check here if non-filing statement is no check here if non-filing statement is no check here if no check here is no check here is no check here is no check here.	sources of 2024 income earned for signed and dated. will be provided later.	_	

The form must be completed and signed in the presence of either a Lincoln University Financial Aid Administrator or a Notary Public.

Do <u>not</u> complete this section in advance.

Identity/Statement of Educational Purpose (To be signed at the Institution)

Name of Student:		Student ID#:
Last Name	First Name	M.I.
presenting an unexpired ventor in the student of th	valid government-issued cense, other state-issued dent's photo ID that is a wed, and the name of the adent's ID. In addition, t	iversity to verify his or her identity by d photo identification (ID), such as, but ed ID, or passport. The institution will annotated by the institution with the date e official at the institution authorized to the student must sign, in the presence of onal Purpose provided below.
	in Person: Present this form with or completed by The Lincoln Univers	original valid government-issued photo ID
ID Type:	completed by The Lincoln Univers	Sity Financial Aid Administrator.
ID Number:	Exp. Date:	
FAA Name:		
FAA Title:		
FAA Signature:	Date:	

Identity/Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at Lincoln University to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and
- (b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

These forms will not be accepted if they are faxed or scanned to the Office of Financial Aid. We HAVE to be in receipt of all these original documents.

Statement of Educational Purpose

I certify that I,	, am the ind	ividual signing this Statement of Educational
(Print Student's Name)		
Purpose and that the Federal student financi	ial assistance I	may receive will only be used for educational
purposes, and to pay the cost of attending Li	ncoln Universi	ty for 2026-2027.
Student's Signature	Date	Student's ID Number
	If Submitting by M	
		overnment-issued photo ID of a Notary Public.
State of:		
City/County of:		
Date:		
Before me,		
(print Notary's name):		
Personally Appeared,		
(printed name of signer):		
Droved to me on the basis of satisfactors	v ovridonao of i	dontification.
Proved to me on the basis of satisfactory	evidence of i	(type of unexpired government-issued photo ID provided)
To be the above -named person who signed the	foregoing instru	
Signed:	M	ly commission expires on:
(Notary Signature)		
Witness	my hand and	official seal

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

Section F: Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct.
The student and one parent whose information was reported on the FAFSA must sign and date. Typed computer
signature(s) will not be accepted.

Print Student's Name	Student's ID Number
Student's Signature	 Date
Contributor's Signature	 Date

Please return this worksheet, along with the required documentation to: *Lincoln University*

Office of Financial Aid
1570 Baltimore Pike Lincoln University, PA 19352

If you have any questions, please feel free to contact the Financial Aid Office at (484) 365-5300. Our office hours are 8:30 a.m. to 5:00 p.m., Monday through Friday.