



# 2026-27 Verification Worksheet

## (F7VERD) Federal Student Aid Programs

Dependent

For Office Use:  
SA PA

Your application was selected for review in a process called "Verification." In this process, Marquette will compare information from your FAFSA with this worksheet and financial data you must submit. The law requires completion of Verification before awarding and/or disbursing federal aid. If there are differences between your FAFSA application and your verification documentation, electronic corrections to your FAFSA may be required. Contact Marquette Central at (414) 288-4000 if you have questions.

### INSTRUCTIONS

- Complete all sections of this worksheet in full.
- If you or your parent(s) have filed a 2024 Federal Income Tax Return with the IRS:
  - If you have not already done so, log on to [studentaid.gov/fafsa](https://studentaid.gov/fafsa) and give permission for the FAFSA to pull in IRS information.
  - If you filed taxes in Puerto Rico, a U.S. territory, a Freely Associated State, or a foreign country, you will need to submit a signed copy of your 2024 tax return in addition to giving permission to transfer tax data.
- If your parent(s) was/were not required to file a 2024 Federal Income Tax Return with the IRS:
  - Select either B or C under Parent's Information on the 2<sup>nd</sup> page of this form.
  - If the parent(s) had income: attach all 2024 W-2s, 1099s, or other income statements.
  - If the parent(s) would have filed a tax return outside of the U.S.: submit a letter from the appropriate tax filing authority that the individuals did not file taxes.
- Requested documents **must** be submitted within **30 days** of the initial request to be considered for all available financial aid.
- Upload requested documents using Document Upload found under the Financial Aid tile in [CheckMarg](#), or return them in person to Zilber Hall, Suite 121, or mail to Marquette Central, Office of Student Financial Aid, P.O. Box 1881, Milwaukee, WI 53201-1881.

**NOTE:** Photographs of documents are not acceptable, see [Scanning Documents with your Phone](#) for assistance.

### A. Student Information

|                            |            |          |                                  |
|----------------------------|------------|----------|----------------------------------|
| Last Name                  | First Name | M.I.     | Marquette Identifier (MUID)      |
| Address (include apt. no.) |            |          | Date of Birth                    |
| City                       | State      | Zip Code | Phone Number (include area code) |

### B. Family Information \*If more space is required, attach a separate page.

| Full Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                           |                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------|
| Write the names of the people in your parent(s)' household in the chart below:<br>1. Include <b>yourself</b> on the first line.<br>2. Include <b>your parent(s)</b> : <ul style="list-style-type: none"><li><u>If your parents are divorced</u>, list the parent who provided the majority of your financial support during the last 12 months. If your parents provide equal support, report the parent with the higher income and assets.</li><li><u>If your parent is remarried</u>, include step-parent.</li><li><u>If your parents are unmarried but live together</u>, list Parent #1 and Parent #2.</li></ul><br>3. Include your <b>parent(s)' other children</b> , if your parents provide <i>more than half</i> of their support between July 1, 2026 and June 30, 2027 or if the children would be required to provide parental information if they were completing a 2026-27 FAFSA.<br>Include <b>other dependents</b> , if they now live with your parent(s) and your parent(s) will continue to provide <i>more than half</i> of their support through June 30, 2027. |                                                                           |                         |
| Age                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Relationship to Student                                                   |                         |
| Write the age of each family member in the chart below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Write the relationship of each family member to the student in the chart. |                         |
| Full Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Age                                                                       | Relationship to Student |
| (EXAMPLE) Missy Jones                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 18                                                                        | Sister                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                           | Self                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                           |                         |
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**C. Dependent Student's Information (all applicants)** **Student Name/MUID:****1. Check the box that applies:**

- a. ☐ I filed/will file a 2024 Federal IRS Tax Return, Puerto Rican, or Foreign Income Tax Return.
- b. ☐ I was not employed, did not have income, and was not required to file a 2024 Federal IRS Tax Return.
- c. ☐ I was employed and had income, but was not required to file a 2024 Federal IRS Tax Return:
- **Complete the chart below:** list employer(s) (including Marquette) and the amount that was earned in 2024
  - **Attach copies of all 2024 W-2 and 1099 Forms.**

| <b>COMPLETE<br/>CHART<br/>ONLY IF<br/>BOX c<br/>ABOVE IS<br/>CHECKED</b> | Non-Tax Filers with 2024 earnings are federally required to submit a copy of W-2(s) from each employer to Marquette Central with this form. |                          |                                                    |                             |                                                   |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------|-----------------------------|---------------------------------------------------|
|                                                                          | Name of Employer                                                                                                                            | Amount<br>Earned in 2024 | 2024 W-2 and 1099 Forms<br>received from employer? |                             | 2024 W-2 and 1099 Forms<br>attached to this Form? |
|                                                                          |                                                                                                                                             | \$                       | Yes <input type="checkbox"/>                       | No <input type="checkbox"/> | Yes <input type="checkbox"/>                      |
|                                                                          |                                                                                                                                             | \$                       | Yes <input type="checkbox"/>                       | No <input type="checkbox"/> | Yes <input type="checkbox"/>                      |
|                                                                          |                                                                                                                                             | \$                       | Yes <input type="checkbox"/>                       | No <input type="checkbox"/> | Yes <input type="checkbox"/>                      |

\*If more space is required, attach a separate page.

**Note: If you lost or never received a W-2, contact your employer to request a copy to provide with this form.****D. Parent(s)' Information****1. Check the box that applies:**

- a. ☐ I filed/will file a 2024 Federal IRS Tax Return, Puerto Rican, or Foreign Income Tax Return.
- b. ☐ I was not employed, did not have income, and was not required to file a 2024 Federal IRS Tax Return.
- If you would have filed taxes outside of the U.S.: attach a letter from the appropriate tax filing authority that you did not file taxes.
- c. ☐ I was employed and had income, but was not required to file a 2024 Federal IRS Tax Return:
- **Complete the chart below:** list employer(s) and the amount that was earned in 2024
  - **Attach copies of all 2024 W-2 and 1099 Forms.**
  - If you would have filed taxes outside of the U.S.: attach a letter from the appropriate tax filing authority that you did not file taxes.

| <b>COMPLETE<br/>CHART<br/>ONLY IF<br/>BOX c<br/>ABOVE IS<br/>CHECKED</b> | Non-Tax Filers with 2024 earnings are federally required to submit a copy of W-2(s) from each employer to Marquette Central with this form. |                          |                                                    |                             |                                                     |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------------------|-----------------------------|-----------------------------------------------------|
|                                                                          | Name of Employer                                                                                                                            | Amount<br>Earned in 2024 | 2024 W-2 and 1099 Forms<br>received from employer? |                             | 2024 W-2, 1099s and Non-<br>Filing Letter attached? |
|                                                                          |                                                                                                                                             | \$                       | Yes <input type="checkbox"/>                       | No <input type="checkbox"/> | Yes <input type="checkbox"/>                        |
|                                                                          |                                                                                                                                             | \$                       | Yes <input type="checkbox"/>                       | No <input type="checkbox"/> | Yes <input type="checkbox"/>                        |
|                                                                          |                                                                                                                                             | \$                       | Yes <input type="checkbox"/>                       | No <input type="checkbox"/> | Yes <input type="checkbox"/>                        |

\*If more space is required, attach a separate page.

**Note: If you lost or never received a W-2, contact your employer to request a copy to provide with this form.****E. Signature. Manually sign with a ballpoint pen.****\*Forms with digital/electronic/typed signatures cannot be accepted and will be returned.**

Each person signing certifies that all the information reported is complete and correct. The student and at least one parent whose information was reported on the 2026-27 FAFSA must sign and date this worksheet.

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

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Parent's Name: \_\_\_\_\_

Parent Daytime Phone and/or Email: \_\_\_\_\_