

## Financial Aid Office **VERIFICATION FORM 2025-2026**

Your Financial Aid Application was selected for Verification. Gonzaga will compare your FAFSA with the information you provide. We will make corrections if there are differences. We will send notification to your Zagmail when the Verification process has been completed.

Complete all sections of the form, sign & date and upload completed form to: Gonzaga.edu/upload

Si	tudent Name					Student ID#	
Se	ection 1: Family In	forma	<b>ntion</b> Mor	e info at: https	:://www.gonzaga.edu/vei	rificati	ion
DEPENDENT STUDENT: Student required to report parent(s) on FAFSA				INDEPENDENT STUDENT: Student not required to report parent data on FAFSA			
<ul> <li>List all people in your parent(s) household:</li> <li>Yourself, and your parent(s), (including stepparent if applicable)</li> <li>Your parent(s) other children, even if they do not live with your parent(s), if the parent(s) will provide more than 50% of their financial support from July 1, 2025 through June 30, 2026</li> <li>Other people who live in your parent(s) household, for whom your parent(s) will provide more than 50% of their financial support from July 1, 2025 through June 30,2026</li> </ul>			<ul> <li>Vourself (and spouse if applicable)</li> <li>Your children, if you will provide more than 50% of their financial support from July 1, 2025 through June 30, 2026 or if the child would be required to list you as their parent on the 2025-2026 FAFSA</li> <li>Other people who reside in your household whom you will provide more than 50% of their financial support from July 1, 2025 through June 30, 2026</li> </ul>				
	Family Member's Full Name	Age	Relation to Stud		Name of College (if enrolled in 2025-		2025-26 College Enrollment
			Self		Gonzaga Universit	ty	□Full Time □Half Time □Not Applicable
			□Parent/Steppar □Sibling/Stepsibli □Other:	ng			□Full Time □Half Time □Not Applicable
			□Parent/Steppar □Sibling/Stepsibli □Other:	ng			□Full Time □Half Time □Not Applicable
			□Parent/Steppar □Sibling/Stepsibli □Other:	ng			□Full Time □Half Time □Not Applicable
			□Parent/Steppar □Sibling/Stepsibli □Other:	ng			□Full Time □Half Time □Not Applicable
			□Parent/Steppar □Sibling/Stepsibli □Other:	ng			□Full Time □Half Time □Not Applicable

Financial Aid Office | Gonzaga University | 502 E Boone Ave | Crosby Center 001 | Spokane, WA 99258-0082

P: 509-313-6582 F: 509-313-5816 E: finaid@gonzaga.edu Upload Document: gonzaga.edu/upload

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#### Section 2: Student's 2023 Earnings and Tax Information

If you the student:	Then you must:		
☐ Filed a 2023 Federal IRS Tax Return (1040 Form), Puerto Rican or Foreign Tax Return	Authorize consent to utilize the Future Act - Direct Data Exchange (FA-DDX) to transfer your 2023 tax data to your 2025-26 FAFSA. If used, no tax documents are needed. However, if the transfer was not successful, submit a 2023 IRS Tax Return Transcript or signed 1040. Please contact the Financial Aid Office if you have questions.		
☐ I have income but am not required to file a 2023 Federal IRS Tax Return	Submit or <u>Upload</u> copies of all 2023 W-2(s)		
☐ I have zero income and am not required to file a 2023 Federal IRS Tax Return	Check the box and proceed to Section 3		

### Section 3: Parent(s) 2023 Earnings and Tax Information

If you the Parent:	Then you must:		
☐ Filed a 2023 Federal IRS Tax Return (1040 Form), Puerto Rican or Foreign Tax Return	Authorize consent to utilize the Future Act - Direct Data Exchange (FA-DDX) to transfer your 2023 tax data to your 2025-26 FAFSA. If used, no tax documents are needed. However, if the transfer was not successful, submit a 2023 IRS Tax Return Transcript or signed 1040. Please contact the Financial Aid Office if you have questions.		
☐ I have income but am not required to file a 2023 Federal IRS Tax Return	Submit or <u>Upload</u> copies of all 2023 W-2(s) and Submit a 2023 <u>Verification of IRS Non-Filing Letter</u>		
☐ I have zero income and am not required to file a 2023 Federal IRS Tax Return	Submit a 2023 Verification of IRS Non-Filing Letter		

#### Signatures

By signing this form, I affirm that all information on this form and on any attachments is complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

Student Signature (Required)	Date	
Parent Signature (Required for Dependent Students)	Date	