

2024 - 2025 Dependent Verification Worksheet 5

Student's Last Name		lame Student's First Name	UO	ID Number	Pro	gram of Study				
STUDENT'S FAMILY INFORMATION										
PARENT'S		Married		Widowed						
MARITAL		Divorced/separated - Remarried		D ivorced/separated	- Not Ren	narried of Living Together				
STATUS	C	Never Married - Living Together		Never Married—N	lot Living	Together				
Carefully rea	Carefully read the following instructions, and in the table below (use back of form if needed), report:									
•	Yourself,									
•		parents including step-parents. Do no		-	-					
 Your parent(s)' other dependent children, if your parent(s) will provide more than half of their support from July 1, 2024 through June 30, 2025 or if the other children would be required to provide parental information if they were completing a FAFSA for 2024-2025. 										
•	 Other people only if they now live with your parent(s) and your parent(s) will provide more than half of their support from July 1, 2024 through June 30, 2025. 									
 Provide college information for those students attending at least half-time during 2024-2025 in a program leading to a degree, diploma, or certificate. 										
		Last Name, First Name	Age	Relationship to S	tudent	College or University				
Student				Self		University of Guam				
Parents or S	itep-									
Parents										
Children and others										
STUDENT AND PARENT TAX INFORMATION										
Student:			Parent	Parent(s):						
I filed a 2022 Tax Return and used the IRS Data Retrieval Tool on the FAFSA or attached a signed 2022 federal tax form and W2 to this worksheet.			ral	tax form and W2 to this worksheet.						
I have not filed a Federal Income Tax Return and am not required to do so. I have attached the Non-Tax Filers Statement to this worksheet.			O	I have not filed a Federal Income Tax Return and am not required to do so. I have attached the Non-Tax Filers Statement to this worksheet.						
Student Signature Date				Signature		Date				

Student's Last Name		Student's First Name	UOG ID Number	Program of Study			
	ST	UDENT'S HIGH SCHOO	L COMPLETION ST	SATUS			
Provide <u>one</u> o gins college in	_	locuments to indicate the student'	s high school completion st	atus when the student be-			
0	A copy of the	A copy of the student's high school diploma.					
0	For students ving certificate	For students who completed secondary education in a foreign country, a copy of the "secondary school leav- ng certificate" or other similar document.					
0	A copy of the awarded.	A copy of the student's final official high school transcript that shows the date when the diploma was $\$ awarded.					
0	A State certificate or transcript received by a student after the student passed a State-authorized examination that the State recognizes as the equivalent of a high school diploma (GED test, HiSET, TASC, or other State-authorized examination).						
0	An academic transcript that indicates the student successfully completed at least a two-year program that is Acceptable for full credit toward a bachelor's degree.						
0	For a student who was homeschooled in a State where State law requires the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized Equivalent), a copy of that credential.						
0	For a student who was homeschooled in a State where State law does not require the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized equivalent), a transcript, or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and includes a statement that the student successfully completed a secondary school education in a homeschool setting.						
A stude	ent who is unabl	e to obtain the documentation liste	ed above must contact the fi	inancial aid office.			
	I certify t	hat all the information reported o	on this worksheet is comp	lete and correct.			
Student Signature				Date			
Parent Signa	ture			Date			

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STUDENT'S IDENTITY AND STATEMENT OF EDUCATION AL PURPOSE

The student must appear in person at the University of Guam Financial Aid Office to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driv-

er's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

STATEMENT OF FDUCATIONAL PURPOSE

	• • • • • • • • • • • • • • • • • • • •				
I certify that I ,		, am the individual signing this Statement of Educational Purpose and that the			
(Prir	nt Student's name)				
Federal student finance sity of Guam for 2024		ill only be used for edu	ucational purpose and to pay the cost of attending Unive		
Student Signati	ure	UOG ID Number	Date		
	NOTARY'S CERT	TIFICATE OF A	CKNOWLEDGEMENT		
• A copy in the n	of the unexpired valid go otary statement below, o license, other state-issue	the institution: overnment-issued plor that is presented ed ID, or passport; of	hoto identification (ID) that is acknowledged to a notary, such as, but not limited to, a and ided above, which must be notarized.		
State of					
City/Country of					
On, be	fore me,				
(Date)		(Notary's nar	ne)		
personally appeared, _			, and proved to me on the basis of satisfactory evi-		
	(Print name of si	gner)			
dence of identification			to be the above-named person who signed the		
•	Type of unexpired governme	nt-issued photo ID pro	vided)		
foregoing instrument.					
WITNESS my hand and	official seal		My commission expires on .		
•		y's signature)	(Date)		