



OFFICE OF FINANCIAL AID

3315 University Drive, Building 69
Bismarck, North Dakota 58504
financialaid@uttc.edu
Phone: 701.255.3285
Fax: 701-530-0611

2021-2022 Verification Worksheet for Dependent Student – Form 5 (VWD5)

Student Social Security Number *or* Student ID Number: _____

Student Name: _____ Phone Number: _____

Form must be completed in blue or black ink. Failure to accurately complete this form may result in a delay of processing or change of financial aid eligibility. Additional documentation may be requested. Read instructions carefully before completing.

Section 1: High School Completion Status

Please submit documentation to verify you have completed a high school education. Acceptable documentation can include:

- A high school diploma or a copy of an official high school transcript. Transcripts must verify graduation completion date
- GED certificate or transcript
- A transcript that indicates that you have successfully completed at least a two-year program that is acceptable for full credit towards a bachelor’s degree at any participating school
- Home school credential or transcript
- If high school completed in foreign country, a copy of the “secondary school leaving certificate” or similar document. If a foreign High School transcript is provided it must be translated and evaluated. For a list of qualified service providers, please visit www.naces.org/members.

Type of documentation submitted: _____

Designated institutional official: _____
(School official’s printed name)

Section 2: Identity

MUST BE COMPLETED & SIGNED AT THE FINANCIAL AID OFFICE

If unable to appear in person at the Financial Aid Office, you must complete this section with a notary

You must appear in person at _____ Financial Aid Office to verify your
(Name of institution)

identity by presenting a valid unexpired government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport. The institution will maintain a copy of your photo ID.

Type of documentation submitted: _____

Designated institutional official: _____
(School official’s printed name)



OFFICE OF FINANCIAL AID

3315 University Drive, Building 69
Bismarck, North Dakota 58504
financialaid@uttc.edu
Phone: 701.255.3285
Fax: 701-530-0611

Student Social Security Number *or* Student ID Number: _____

Section 3: Statement of Educational Purpose

MUST BE COMPLETED & SIGNED AT THE FINANCIAL AID OFFICE

If unable to appear in person at the Financial Aid Office, you must complete this section with a notary

In addition, you must sign, in the presence of the institutional official, the following:

I certify that I _____ am the individual signing this Statement of Educational
(Student's printed name)
Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay
the cost of attending _____ for 2021-2022.
(Name of institution)

Student Signature: _____ Date: _____

Notary Section Instructions: Please Read

This section should only be completed if you are unable to appear in person at the institution with a designated official. This form (the original on which the seal is visible) should be mailed to the Financial Aid Office at your institution along with the copy of the government-issued identification and high school documentation.

Notary's Certificate of Acknowledgement

State of _____ City/County of _____

On _____, before me _____
(Date) (Notary's name)

Personally appeared _____ and proved to me on the basis of
(Printed name of signer)

Satisfactory evidence of Identification _____ to be the above-named
(Type of unexpired government-issued ID provided)

Person who signed the foregoing instrument.

My commission expires on _____, 20_____

Notary (Print): _____

Notary (Signature): _____

(Seal)



OFFICE OF FINANCIAL AID

3315 University Drive, Building 69
Bismarck, North Dakota 58504
financialaid@uttc.edu
Phone: 701.255.3285
Fax: 701-530-0611

Student Social Security Number *or* Student ID Number: _____

Section 5: Income Information

TAX FILERS:

- **If you and/or your parent(s) filed a 2019 Federal Income Tax Return**, you must either give the Internal Revenue Service(IRS) permission to transfer all 2019 tax information directly to the FAFSA through the IRS Data Retrieval Tool, or submit a 2019 Federal Tax Return Transcript, or a signed copy of the 2019 Federal Tax Return(including schedules). *If there are two parents listed on your FAFSA and they did not file 2019 taxes jointly,both parents listed on the FAFSA should submit a Tax Return Transcript or Tax Return*
- **To obtain an IRS Federal Tax Return Transcript**, you may go to <https://www.irs.gov/individuals/get-transcript> and click on “Get a Transcript Online” or “Get a Transcript by Mail” or call 1-800-908-9946. Be sure to order the IRS Tax “Return” Transcript.

NON-TAX FILERS:

- **If your parent(s) did not file a 2019 Federal Income Tax Return**, they are required to submit a Statement of Non-Filing and all 2019 W2s. To obtain a 2019 Statement of Non-Filing, go to <https://www.irs.gov/pub/irs-pdf/f4506t.pdf> and complete Form 4506-T with **Box 7** checked. If you are unable to obtain the Verification of Non- Filing, please contact the Financial Aid Office.

2019 Tax Filing Status: Only select one option for each individual	Student	Parent
1. Has used or plans to use the IRS Data Retrieval Tool to transfer tax information electronically on FAFSA, or has plans to submit a copy of their 2019 IRS Federal Tax Return Transcripts or signed 2019 IRS Federal Return.	<input type="radio"/>	<input type="radio"/>
2. Had income earned from work in 2019 as listed below, but has not filed and was not required to file a tax return and already has or plans to submit all 2019 W2's. If this box is selected; 2019 wage information must be completed below.	<input type="radio"/>	<input type="radio"/>
3. Had no income, will not file, and was not required to file, a 2019 IRS Income Tax Return.	<input type="radio"/>	<input type="radio"/>

2019 Wage Information (Only Non-Filers)

*Only complete wage information for each person who selected **Option2** in the previous chart.*

Non-Tax Filer	Name of Employer	2019 Income Earned
Student		\$
		\$
Parent		\$
		\$

Student Signature _____ Date: _____

Parent Signature _____ Date: _____

Each person signing certifies the information reported is complete and accurate. The student and one parent whose information was reported on the FAFSA must sign and date