



V5 - Independent

Financial Aid Office
10 South 2nd St. Box 1706
Reading, PA 19603
racc.edu/admissions/financial-aid
610.607.6225

Reading Area Community College 2026-2027 INDEPENDENT VERIFICATION WORKSHEET

Your 2026-2027 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information RACC will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid office at RACC. We may need to ask for additional information in the future. If you have questions about verification, contact our office as soon as possible so that your financial aid will not be delayed.

STUDENT INFORMATION

Please complete this verification form and provide copies of all requested paperwork within **15 days** of receipt to Reading Area Community College

Student Name : _____ (Please Print) Last, First

RACC ID # _____ Last 4 digits of SS#: _____

Permanent Home Address: _____

City _____ State _____ Zip Code _____
Student's Date of Birth: _____ Home Phone #: _____ Cell #: _____

FAMILY INFORMATION

- Yourself
- Your spouse if you are married (even if you were not married in 2024)
- Your children if the following are true:
 - They live with you (or live apart because of college enrollment)
 - They receive more than half of their support from you, and
 - They will continue to receive more than half of their support from you during the award year.
- Other persons if the following are true:
 - They live with you (or live apart because of college enrollment)
 - They receive more than half of their support from you, and
 - They will continue to receive more than half of their support from you during the award year.

The provided criteria for "dependent children" or "other persons" align with the requirement that family size align with whom the parent could claim as a dependent on a U.S. tax return if the parent were to file a U.S tax return at the time of completing the 2026-2027 FAFSA. As a result, **the parent should not include any unborn children in the family size**. Support is defined as providing food, housing, medical/dental care or health insurance, money or other financial resources. If you need more space, attach a separate sheet.

FULL NAME	AGE	RELATIONSHIP to STUDENT
		<i>Self</i>

V5 - Independent

FULL NAME (Cont'd)	AGE (Cont'd)	RELATIONSHIP to STUDENT

STUDENT 2024 INCOME

Please choose a scenario:

- ☐ I consented to use the Direct Data Exchange (DDX) on the FAFSA to retrieve and transfer 2024 IRS income information into my FAFSA, either on the initial FAFSA or when making a correction to the FAFSA **OR** will provide the institution with a 2024 IRS Tax Return Transcript or a signed copy of the 2024 income tax return and applicable schedules.
- ☐ I was not employed and had no income earned from work in 2024.
- ☐ I was employed during 2024 but was not required to file a 2024 federal tax return.

- **Must submit W-2 forms for each employer.**
- **List below the name of all employers and the amount earned from each employer.**

EMPLOYER NAME	STUDENT AMOUNT	W-2 Attached?(YES/NO)
	\$	
	\$	
	\$	

2026-2027 IDENTITY

As part of the verification process, you must appear in person at Reading Area Community College Office of Financial Aid to verify your identity and provide the following:

- A valid government-issued photo identification (ID), such as, a driver's license, other state-issued ID or passport.

If you are not able to appear in person, you must submit:

- A copy of the government-issued ID as referenced in the Notary's Certificate Acknowledgement.

NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT

(Only complete this section if you cannot appear in person)

State of _____ City/County of _____ On _____,

before me, _____, personally appeared, _____, and
Notary's Name Printed Name of Signer

provided to me on basis of satisfactory evidence of identification _____

Type of government-issued photo ID provided

_____.

Notary Signature **WITNESS my hand and official seal**

My commission expires on _____ (Seal)
Date

CERTIFICATION AND SIGNATURES

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student must sign and date this worksheet.

Student's Signature Date

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