Wabanung Campus

770 N. Main St L'Anse, MI 49946 Phone: (906) 524-8400

Fax: (906) 524-8420



Arts & Agriculture Center

15211 Pelkie Rd Pelkie, MI 49958 Phone: (906) 524-8903

Fax: (906) 524-8420

KBOCC Mission Statement: As a tribal land grant institution, Keweenaw Bay Ojibwa Community College supports and uplifts all learners to achieve their goals through holistic education, while promoting Anishinaabe culture, language, and lifeways.

2025-26 Verification Worksheet

Federal Student Aid Program

Your application was selected by the Department of Education for review in a process called "Verification." In this process, Keweenaw Bay Ojibwa Community College will compare information from your FAFSA with this worksheet and the 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 and your verification documentation, electronic corrections to your FAFSA may be required. You must complete and sign this worksheet, attach all required documents, and return them to the financial aid office before your application can be processed. Contact the financial aid office at (906)524-8109 if you have any questions.

A. Student Information				
Last Name	First Name	M.I.	Social Security Number	
Address (include apt. n	0.)		Date of Birth	
City	State	Zip Code	Phone Number (include area code)	
_				
B. Dependency S	Status (Check the box that applies)			
☐ Independent Stu	dent			
of the armed forces, a		eone with legal dependents o	nate or professional student, a veteran, a member other than a spouse, an emancipated minor or	
Dependent Stude	ent			

A student who does not meet any of the criteria for an independent student as listed above. Students who are considered dependent must report on their parents' income and assets in addition to their own. This is because federal student aid programs are based on the notion that parents have the primary responsibility for paying for their children's higher education expenses.

C. Family Information "If more space is required, attach a separate page."

Number of Hous	Age			
Independent Student's Family Information: 1. The Student and Student's Spouse (if married)			Write the age of each family member in the chart below.	
 The student's/spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2025, through June 30, 2026, even if the children do not live with the student. Other people in the household who live with the student receive more than half of their support from the student and will continue to do so through June 30, 2026. Dependent Student's Family Information: The Student and Parent(s) (including stepparent), even if you don't live with your parent(s). Parent(s) other children if your parent(s) provide more than half of their support from July 1, 2024, through June 30, 2026. Other people in the household who live with your parent(s), receive more than half of their support from your parent(s) and will continue to do so through June 30, 2025. 			Relationship Write the relationship of each family member to the student attending KBOCC in the chart below. College Add the name of the college for any household member (excluding parents) who will be enrolled in a postsecondary educational institution at least half-time any time from July 1, 2025, through June 30, 2026.	
Full Name Age Relationship		College		
Missy Jones (example)	27	Spouse	N/A	
		Self	Keweenaw Bay Ojibwa Community College	

D. Students' Information (All applicants)						
a. Check the	box that applies:					
The studen	t filed a 2023 Federal IRS Tax I	Return, Puerto Rican, or F	oreign Income Tax Return.			
	You must link to the IRS using the IRS Data Retrieval Tool on the FAFSA or submit a signed 2023 Income Tax Return .					
∐The studer	nt was not employed and had no	o income from work in 202	23.			
	Independent students must provide a Verification of Non-Filing Letter from the IRS (please complete and return the 4506-T form).					
The studen	nt was employed and had incom	ne but was not required to	file a 2023 Federal IRS Tax	Return.		
	You must complete the char	rt below: list employer(s) and	the amount that was earned in	2023.		
	You must attach copies of a	ll 2023 W-2 and 1099 Forms				
	Independent students must provide a Verification of Non-Filing Letter from the IRS (please complete and return the 4506-T form).					
	Non-Tax Filers with 2023 earnings are federa	lly required to submit a copy of W-2(s) fi	om each employer to Keweenaw Bay Ojiby	wa Community College with this form.		
ONLY	Name of Employer	Amount Earned in 2023	2022 W-2 and/or 1099 Forms	2023 W-2 and 1099 Forms attached to		
COMPLETE IF YOU			received from employer?	this Worksheet?		
CHECKED			Yes U No U	Yes 🗌		
THE LAST BOX ABOVE			Yes U No U	Yes 🗌		
			Yes U No U	Yes 🗌		
			Yes U No U	Yes 🗌		
F Parent(s	e)' Information (Required	for Dependent Stude	nts)			
•	box that applies:	101 Dependent Stude				
	(s) filed a 2023 Federal IRS Tax	Return, Puerto Rican, or	Foreign Income Tax Return			
You must link to the IRS using the IRS Data Retrieval Tool on the FAFSA or submit a signed 2023						
Income Tax Return.						
The parent(s) were not employed and had no income from work in 2023.						
You must provide a Verification of Non-Filing Letter from the IRS (<u>please complete and return the 4506-T form</u>).						
The parent	(s) were employed and had inco	ome, but were not required	to file a 2023 Federal IRS T	ax Return.		
You must complete the chart below : list employer(s) and the amount that was earned in 2023.						
	You must attach copies of all 2023 W-2 and 1099 Forms.					
	You must provide a Verification of Non-Filing Letter from the IRS (<u>please complete and return the 4506-T</u> form).					

ONLY	Non-Tax Filers with 2023 earnings are federally required to submit a copy of W-2(s) from each employer to Keweenaw Bay Ojibwa Community College with this form.				
COMPLETE	Name of Employer	Amount Earned in 2023	2022 W-2 and/or 1099 Forms	2022 W-2 and 1099 Forms attached to	
IF YOU			received from the employer?	this worksheet?	
CHECKED THE LAST			Yes _ No _	Yes 🗌	
BOX ABOVE			Yes No	Yes 🗌	
				_	
			Yes \(\sum \) No \(\sum \)	Yes 📙	
			Yes \(\) No \(\)	Yes 🗌	

Each person signing this worksheet certifies that all of the information reported is complete and correct.

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

Parent's Signature (Required for Dependent Students)

F. Certification and Signatures

Student's Signature (Required)

Date

Date

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet and all required documentation to the financial aid administrator at your school.

KBOCC Financial Aid Office:

770 N. Main Street, L'Anse, MI 49946

Phone: 906-524-8109

Fax: 906-524-8101

Email: financialaid@kbocc.edu