

2025-2026 VERIFICATION WORKSHEET – Dependent V4

Your FAFSA application was selected for review in a process called verification. We are required by law to compare the information on your 2025-2026 FAFSA with the information provided on this form.

Financial aid will not be credited to your account until this process is complete.

A. Student Information

Last Name	First Name	M. I.	Student ID
Permanent Home Address (Include Apt. number)			Date of Birth
City	State	Zip Code	Phone (include area code)

B. FAMILY INFORMATION

List the people in your parent(s) household including:

- The student and student’s parent(s) (including step-parent) **even** if the student does not live with the parents.
- The parents’ other children, even if they don’t live with the parents(s), if:
 - (a) the parents will provide more than half their support from July 1, 2025 through June 30, 2026
 - (b) these children would be required to provide parental information when filing the FAFSA for 2025-2026.
- Other people if they now live with the parents, and the parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2025 through June 30, 2026.

Number in College: Include in the space below information about any household member, excluding the parents, who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2025, and June 30, 2026, and include the name of the college.

FULL NAME	AGE	RELATIONSHIP	COLLEGE	Attending at Least Half Time (Yes or No)
		SELF	Luzerne County CC	

*Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

C. In addition to completing the information requested on this verification worksheet, you are also required to submit the following:

1. Completed Identity and Statement of Educational Purpose form (*Enclosed*)

a. You must appear in person at the Luzerne County Community College Financial Aid Office located at 521 Trailblazer Dr. Nanticoke, PA 18634, to verify your identity and sign the enclosed Statement of Educational Purpose (Signed at Institution). You must bring an unexpired, valid government-issued photo identification (ID), such as a driver's license, other state-issued ID, or passport. Office hours are Monday through Friday 8:00am to 5:00pm. Our phone number is (800) 377-5222 ext. 7389.

OR

b. If you are unable to appear in person at the Financial Aid Office, you are required to complete the enclosed Identity and Statement of Educational Purpose (Signed with Notary) and mail it along with a copy of an unexpired, valid government-issued photo ID to the Luzerne County Community College Financial Aid Office located at 521 Trailblazer Dr. Nanticoke, PA 18634. The Notary's Certificate of Acknowledgement section of this form must be completed by a licensed Notary to be accepted.

D. Certifications and Signatures

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Print Student's Name

Student's ID Number

Student's Signature (Required)

Date

Parent's Signature (Required)

Date

Return this form and requested documents to:

**Luzerne County Community College
Office of Financial Aid
521 Trailblazer Dr.
Nanticoke, PA 18634
Phone: 570-740-0389**

Fax: 570-740-0347
(please make sure to fax all pages)

Email: fao@luzerne.edu

Luzerne County Community College must review the requested information under the financial aid program rules (34 CFR, Part 668)