

RRAAREQ Code: IVW23

Student Name (blue or black ink only): Sammy Bearkat

## Sam Houston State University Financial Aid and Scholarships Office MEMBER THE TEXAS STATE UNIVERSITY SYSTEM

## **INCOME VERIFICATION WORKSHEET 2022-2023**

If you make any corrections, white outs, or alterations to any of your information on this form, you MUST initial next to it.

SAM ID: \_000123456

Your 2022-2023 Free Application for Federal Student Aid (FA mandates that we have the right to ask for this information. I need to be made to your Student Aid Report (SAR).  Incomplete verification packets will NOT be accepted.  Dependent Students will list:  Yourself  Your parent(s) that live in the household (this should parent(s) listed on your FAFSA). This includes steppar Your parent(s) other children who are ages 0-23 parent(s) will provide more than 50% of their support through June 30, 2023.  Siblings that are listed as "in college" must half time and have a birthdate after January Siblings that are dual enrolled while in high school can household but not as "in college."	d also be the rents. year(s) old t from July 1 be: enrolled y 1, 1999. be included	Independent Study Yourself Your spouse if Your children i 1, 2022 throug Chi half at least in the	dents will list:  married f you will provide more than 50% of their s h June 30, 2023. dren that are listed as "in college" must be: time and have a birthdate after January 1, ual enrolled while in high school can be s "in college."	upport from July enrolled at least
Family Information: Write name the age, and relationsh  Full Name	hip of all house	sehold members in the chart be	If this person (excluding parents) will to student attend <u>college</u> in 2022-2023,  Print the page of the college  Half-	Enrolled at
		Relationship to student		Least Half-Time (circle one)
Sammy Bearkat	18	SELF	SHSU	Yes / No
Samuel Bearkat	43	Father		Yes / No
Samantha Bearkat	42	Mother		Yes / No
Sabrina Bearkat	21	Sister	SHSU ID#000987654	Yes No
Sawyer Bearkat	15	Brother		Yes / No
				Yes / No
				Yes / No
Statements of support for extended family members listed in househor your parent(s) pay more than 50% of their financial support.  WARNING: If you purposely give false or misleading information complete and correct.				
Student Signature: Sammy Bearkat			Date: 08/01/22	_
Parent Signature: Samuel Bearkat			Date: 08/01/22	_

Return completed form to: Financial Aid and Scholarships Office Email: PDF from SHSU Email to fadocuments@shsu.edu • Fax: 936.294.3668 Mail: Box 2328, Huntsville TX 77341-2328

Revised 9/21