

2026-2027 Dependent Verification Worksheet

Stud	ent Information:			
Name	e: RIC ID:			
Email	l: Phone:			
Household Information:				
 List below the people in the parents' household. Include: The student. The parent(s) (including a stepparent if remarried) even if the student does not live with them. Include parents who are temporarily separated from the household, such as a parent on Active Duty in the U.S. Armed Forces. The parent(s)' other children if the parent(s) will provide more than half of their financial support from July 1, 2026 through June 30, 2027 or if they are considered a dependent student by FAFSA dependency guidelines. Include children that meet either of these standards even if they do not live with their parent(s). 				

Other people that currently live with the parent(s) <u>if the parent(s) provide more than</u> <u>half of their financial support and will continue to do so through June 30, 2027.</u>

	Full Name	Age	Relationship to Student
1			Self
2			
3			
4			
5			
6			
7			
8			
9			
10			

Phone: 401-456-8033 Fax: 401-456-8686 Email: financialaid@ric.edu



Student Income Information:						
Check only one of the boxes below and provide additional information and documentation as listed.						
I filed a 2024 Federal Income Tax return and consented to the IRS Direct Data Exchange. There were no amendments made to my return.	No additional information is required.					
I filed a 2024 Federal Income Tax return and consented to the IRS Direct Data Exchange. My 2024 return has been amended or my information was unable to be retrieved.	I have attached my 2024 1040 or 1040					
I had no income earned from work and was not required to file a 2024 Federal Income Tax Return.	No additional information is required.					
	List total 2024 earnings below:					
I worked, but was not required to file a	Employer	Amount Earned in 2024				
2024 Federal Income Tax Return.		\$				
		\$				
	Please provide copies of all IRS W2s or equiply your employer(s).	ivalent forms issued to you				

Parent Income Information:						
Check only one of the boxes below and provide additional information and documentation as listed.						
I/we filed a 2024 Federal Income Tax return and consented to the IRS Direct Data Exchange. There were no amendments made to the return.	No additional information is required.					
I/we filed a 2024 Federal Income Tax return and consented to the IRS Direct Data Exchange. The 2024 return has been amended or the information was unable to be retrieved.	I/we have attached the 2024 1040 or 1040X amended return I/we will submit the 2024 1040 or 1040X amended return separately.					
I/we had no income earned from work and were not required to file a 2024 Federal Income Tax Return.	No additional information is required.					

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		List total 2024 earnings below:					
		Employer	Amount Earned in 2024				
I/we had income earned from work, but			\$				
were not required to file a 2024 Federal Income Tax Return.			\$				
			\$				
	Please provide copies of all IRS W2s or equivalent forms issued to you by your employer(s).						
Certification and Signatures							
We certify that all information provided on this worksheet is complete and accurate. The student and parent must sign this worksheet.							
Student Signature:			Date:				
Parent Signature:		Date:					
If there are differences between the data reported on your FAFSA and the verification documents, our							

office will electronically make the corrections to your FAFSA.

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