

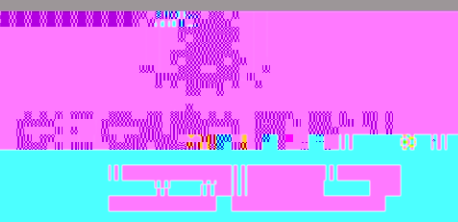
Office of Student Financial Aid*Cook Admin. 207*Chicago, IL 60628*(P) 773-995-2304*(F) 773-995-3574*csu-finaid@csu.edu
2024-2025 DEPENDENT VERIFICATION WORKSHEET-V1

STUDENT INFORMATION

Please complete this verification form and provide copies of all requested paperwork within **10 days** of receipt to the Office of Student Financial Aid at Chicago State University.

Student Name: _____ CSU ID # _____
(Please Print) Last First





STUDENT 2022 INCOME

Please choose a scenario:

requested a 2022 Tax Return Transcript from the IRS
income earned from work in 2022

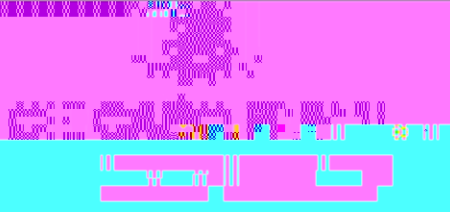
2

Must submit W-2 forms for each employer

List below the names of all employers and the amount earned from each employer

(PLEASE NOTE: ~~name of the employer~~ ~~W-2 form~~ ~~amount earned~~ ~~from each employer~~) - 4 fs3





ADDITIONAL INFORMATION. PLEASE READ AND KEEP FOR YOUR RECORDS

[Redacted]

[Redacted]