

United States Merchant Marine Academy

Office of Financial Aid T: 516.726.5638 F: 516.773.5390 financialaid@usmma.edu

2025-2026 Independent Verification Worksheet Federal Student Aid Programs

Your **2025-2026** Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided the correct information, the Office of Financial Aid will compare your FAFSA with the information on this worksheet along with other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and **submit all documents to the Office of Financial Aid**. If you have questions or concerns regarding verification, please do not hesitate to contact the Office of Financial Aid.

A - Independent Student Inform	ation
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Student Last Name	Student First Name		Student's School ID #
Student's Street Address (include Apt #)			Parent Phone Number (include area code)
City	State	Zip Code	Student Phone Number (include area code)

B - Independent Student Family Information

List below the people in your household.

- Yourself
- Your spouse, if you are married
- Your children, if any, if you will provide more than half of their support from July 1, 2025 through June 30, 2026.
- Other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2026.

Include the name of the college for any household member who will be enrolled at least half time in a degree, diploma or certificate program at a postsecondary education institution any time between July 1, 2025 and June 30, 2026. If more space is needed, attach a separate page with the student's name and student ID number at the top.

Full Name	Age	Relationship	College or University Name	Enrolled at Least ½ Time
John/Jane Doe (example)	24	Wife	Central University (example)	Yes or No
		Self		

Student'	s Full Name		School ID #			
C - In	dependent Student's Income Inf	ormation to be Verified (check the box the	aat applies)			
	I, the student, has consented to use the Direct Data Exchange (DDX) on the FAFSA to retrieve and transfer my 2023 IRS income information into the FAFSA, either on the initial FAFSA or when making a correction <u>OR</u> will provide USMMA with a 2023 IRS Tax Transcript <u>OR</u> a signed copy of the 2023 1040 Income Tax Return and all applicable schedules.					
	I, the student, (and if married, the student's spouse) was not employed and had no income earned from work in 2023.					
are not	required to file a 2023 income tax ret	his section if the student or spouse, if marrurn with the IRS. List every employer even is the students name and student's ID number as				
	Employers Name	2023 Amount Earned	W-2 Attached?			
	Maersk Line (example)	\$1500 (example)	Yes (example)			
<u>Certi</u>	fication and Signatures					
	erson signing this document certifies t is worksheet. If married, the spouse's	hat all of the information reported is complet signature is optional.	e and correct. The student must sign and			
Student'	s Signature		Date			
Spouse's	s Signature		Date			

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

2025-2026 Identity and Statement of Educational Purpose - V4

Your **2025-2026** Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided the correct information, the Office of Financial Aid will compare your FAFSA with the information on this worksheet along with other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and **submit all documents to the Office of Financial Aid**. If you have questions or concerns regarding verification, please do not hesitate to contact the Office of Financial Aid.

Student Information			
Student Last Name	Student First Name		Student's School ID #
Student's Street Address (include A	Apt #)		Student Phone Number (include area code)
City	State	Zip Code	
but not limited to, a driver's licer		assport. USMMA will	ment-issued photo identification ID, such as, maintain a copy of the student's photo ID that ted to collect the student's ID.
In addition, the student must sign Purpose	n this document in the presence of	f an Academy official,	the following Statement of Educational
I certify that I	(Print Full Legal Name)	am the ind	ividual signing this Statement of
			will be used for educational purposes idemic year.
Student's Signature			Date
OFFICE USE ONLY			
I verify that I am an authorized A	Academy employee and have seen	the identification docu	umentation selected above
Authorized Signature			Date

If Student Can Not Appear In-Person

If the Academy determines that an applicant is unable to appear in person to present an unexpired valid government-issued photo identification and execute the Statement of Educational Purpose, the applicant must provide the Academy with the following:

- A copy of an unexpired valid government-issued photo identification such as, but not limited to, a driver's license, non-driver's identification card, other State-Issued identification, or U.S. Passport that is acknowledged in a Notary Statement or that is presented to a Notary.
- USMMA must receive these documents via mail. We cannot accept faxed or uploaded documents. Errors with this form or missing photocopies will delay processing of your financial aid.

Student must sign in the presence of a Notary the following Statement of Education Purpose I certify that I, _____ _____, is the individual signing this Statement of (Print Full Legal Name) Educational Purpose and that the federal student financial assistance I may receive will be used for educational purposes while attending the United States Merchant Marine Academy for the 2025-2026 academic year. Student's Signature - Signed before Notary Date Notary Public: Complete this section only if the student cannot appear in person at the Academy to submit this worksheet. A copy of the same unexpired, signed, valid government-issued ID provided to the Notary must also be provided to the **Academy** State of: _____ County of: ____ On the _____ day of _____ in the year _____ before me, ___ personally appeared Print Student's Name and provided to me on the basis of satisfactory evidence of identification, a _ Type of government-issued photo ID to be the above-named person who signed the foregoing instrument. Signature of Notary Public Commission Expiration Date Stamp: Seal: