



Your 2025-2026 FAFSA was selected for a process called verification. As required by U.S. Department of Education, the Office of Financial Aid will compare your and your parents' data on the submitted FAFSA with the information on this worksheet and other required documents. If there are differences between your submitted FAFSA and the documentation provided, the Office of Financial Aid reserves the right to make all necessary changes with the U.S. Department of Education. Failure to complete the verification process will result in a delay of aid disbursing or possible loss of eligibility.

Per federal law, we are unable to award or disburse any federal and/or state aid until this is resolved.

Dependent Student's Information

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Student's Last Name, First Name, MI	Student Benedictine ID No.	Student's Date of Birth (MM/DD/YYYY)
Street Address (include apt. no.)	City, State	Zip Code

A. Dependent Student's Family Information

List the names of all the members in your parent(s)' household in the chart below. You must:

- **Yourself**
- **Your parent(s)** --Your parents/stepparents, even if you are not living with them. Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces.
- **Your siblings** - Your siblings, that live or live apart and will receive more than half of their financial support from your parent(s) from July 1, 2025 through June 30, 2026. Include siblings if they live apart due to temporary absence such away at college or military service.
- **Other persons** - that live with your parent(s) and if your parent(s) will provide more than half of their support from July 1, 2025 through June 30, 2026.

The provided criteria for "dependent children" or "other persons" reflect with the requirement that family size align with those the parent could claim as a dependent on the **U.S. Federal Tax Return** if the parent were to file a federal tax return at the time of completing the 2025-2026 FAFSA. As a result, the parent should not include any unborn children in the family size.

Full Name	First	Middle	Last	Age	Relationship to Student
EXAMPLE:	Benjamin	Robert	Jones	18	Brother
					Self

B. Certification and Signatures

Each person signing this worksheet certifies that all of the information reported is complete and correct. **Digital/electronic signatures cannot be accepted.** You can submit this form via email to financialaid@ben.edu or upload document drop box located on our [website](#).

Student's Signature (ink signature required)	Date
Parent's Signature (ink signature required)	Date

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