



Office of Financial Aid and Scholarships
V-5 Dependent Verification Worksheet
2025-2026

Student Name:

NSHE ID:

Date of Birth:

Phone Number:

E-Mail Address:

SECTION 1: PARENT DEMOGRAPHIC AND MARITAL STATUS

Based on the answers you provided on your FAFSA, you were determined to be a ***dependent*** student. Answer the questions below about your parent(s) demographic and marital status. If your parents are divorced/separated and **DO NOT live together**, parent 1 listed below should be the parent who has provided the most support over the 12 months immediately prior to filing the FAFSA (even if you do not live with this parent). If equal support is given among both biological parents, parent 1 is the one with the higher income and/or assets.

Parent 1 Full Name:

Date of Birth:

Select one of the options below that best describes Parent 1's marital status as of the day you submitted your FAFSA

Never Married AND other biological parent DOES NOT LIVE with primary parent. DO NOT provide parent 2's information below.

Unmarried AND BOTH biological parents living together. MUST provide parent 2's information below.

Married OR Remarried AND Living together with their spouse. (Either your biological parent or step-parent) MUST provide parent 2 or step-parent's information below.

Married, BUT separated AND NOT living together with their spouse. DO NOT provide parent 2's information below. Selecting this option may require additional documentation at a later date.

Date of Separation (MM/YYYY):

Divorced AND NOT remarried. DO NOT provide parent 2's information below. Selecting this option may require additional documentation at a later date.

Date Divorce Finalized (MM/YYYY):

Widowed. DO NOT provide parent 2's information below. Selecting this option may require additional documentation at a later date.

Date of Parent 2's Death (MM/YYYY):

If the option you selected above indicates parent 2 information is required, enter the requested information below about your parent 2/step-parent

Parent 2 Full Name:

Date of Birth:

SECTION 2: FAMILY SIZE

Are there any additional children or other dependents that your parent(s) claimed on their 2023 Tax Return? If YES, then complete the remainder of the section.

Yes

No

Full Name:

Full Name:

Full Name:

Full Name:

Full Name:

Full Name:

Contact Information

Phone: (775) 784-4666

Email: finaid@unr.edu

Fax: (775) 784-1025



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SECTION 3: PARENT 1 TAX STATUS AND REQUIRED DOCUMENTS

Parent 1, select one option below that best describes your tax status for the **2023 calendar year**.

I filed a 2023 Tax Return. (**Required Documents:** An official 2023 Tax Return Transcript, **OR** a **physically signed** copy of your 2023 IRS 1040 form, **AND** Schedules 1, 2, 3, C, F, and/or K (schedules as applicable). Additionally, attach your W-2s for each employer. If your 2023 tax return was **corrected** please submit the amended taxes as well (Ex. 1040X form or a letter from the IRS).)

I WAS employed in 2023 AND WAS NOT required to file a 2023 Tax Return. (**Required Documents:** List each employer and the amount earned in 2023 below. Additionally, attach your W-2s for each employer.)

Employer Name:

Wages Earned:

Employer Name:

Wages Earned:

Employer Name:

Wages Earned:

I WAS NOT employed in 2023 AND WAS NOT required to file a 2023 Tax Return. (**Required Documents:** None)

SECTION 4: PARENT 2 TAX STATUS AND REQUIRED DOCUMENTS (if applicable)

Parent 2 (if applicable), select one option below that best describes your tax status for the **2023 calendar year**.

I filed Married Filing Jointly with Parent 1 listed in Section 1 of this form for the 2023 tax year. (**Required Documents:** None)

I filed Separately from Parent 1 listed in Section 1 of this form for the 2023 tax year. (**Required Documents:** An official 2023 Tax Return Transcript, **OR** a **physically signed** copy of your 2023 IRS 1040 form, **AND** Schedules 1, 2, 3, C, F, and/or K (schedules as applicable). Additionally, attach your W-2s for each employer. If your 2023 tax return was **corrected** please submit the amended taxes as well (Ex. 1040X form or a letter from the IRS).)

I WAS employed in 2023 AND WAS NOT required to file a 2023 Tax Return. (**Required Documents:** List each employer and the amount earned in 2023 below. Additionally, attach your W-2s for each employer.)

Employer Name:

Wages Earned:

Employer Name:

Wages Earned:

Employer Name:

Wages Earned:

I WAS NOT employed in 2023 AND WAS NOT required to file a 2023 Tax Return. (**Required Documents:** None)

SECTION 5: PARENT ROLLOVERS

Did you report any taxable IRA distributions, pensions or annuities on your IRS 1040 Tax Return for 2023 (lines 4b and/or 5b) AND was this amount a rollover*? If YES, please attach a copy of your 1099-R form.

Parent 1
Yes No/NA

Parent 2 (if applicable)

Yes No/NA

* A rollover occurs when you withdraw assets from one retirement plan and contribute it, within 60 days, to another retirement plan.

Contact Information

Phone: (775) 784-4666

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SECTION 6: STUDENT TAX STATUS AND REQUIRED DOCUMENTS

Student, select one option below that best describes your tax status for the **2023 calendar year**.

I filed a 2023 Tax Return. (**Required Documents:** An official 2023 Tax Return Transcript, **OR** a **physically signed** copy of your 2023 IRS 1040 form, **AND** Schedules 1, 2, 3, C, F, and/or K (schedules as applicable). Additionally, attach your W-2s for each employer. If your 2023 tax return was **corrected** please submit the amended taxes as well (Ex. 1040X form or a letter from the IRS).)

I WAS employed in 2023 AND WAS NOT required to file a 2023 Tax Return. (**Required Documents:** List each employer and the amount earned in 2023 below. Additionally, attach your W-2s for each employer.

Employer Name:

Wages Earned:

Employer Name:

Wages Earned:

Employer Name:

Wages Earned:

I WAS NOT employed in 2023 AND WAS NOT required to file a 2023 Tax Return. (**Required Documents:** None)

SECTION 7: STUDENT ROLLOVERS

Did you report any taxable IRA distributions, pensions or annuities on your IRS 1040 Tax Return for 2023 (lines 4b and/or 5b) AND was this amount a rollover*? If YES, please attach a copy of your 1099-R form.

Yes

No/NA

* A rollover occurs when you withdraw assets from one retirement plan and contribute it, within 60 days, to another retirement plan.

SECTION 8: CERTIFICATION

By signing this verification worksheet, we certify that all information reported is complete and accurate and understand that verification will not be processed if any section of this form is left blank. We further understand that purposely providing false or misleading information on this worksheet may result in being fined, jailed, or both. **Signing for someone else is FRAUD, even with their permission.**

Student Signature:

Date:

Parent 1 Signature:

Date:

Parent 2 signature **REQUIRED ONLY IF** Parent 1 is Unmarried **AND** living together **OR** Married and filed separately.

Parent 2 Signature:

Date:



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NSHE ID:

SECTION 9: IDENTITY AND STATEMENT OF EDUCATION PURPOSE

The statement below must be signed in the **physical presence** of either a **Financial Aid Administrator at the University of Nevada, Reno, or a Public Notary.**

I certify that I, **(print student name)**, am the individual signing this Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay for the cost of attending the University of Nevada, Reno for the 2025-2026 academic year.

Student Signature:

Date:

SECTION 10: NOTARY/THIRD PARTY ACKNOWLEDGMENT

You must sign the above statement in the **physical presence** of one of the approved parties listed below. Select one of the options and provide any other required documents as indicated below.

Financial Aid Administrator (FAA): The FAA **MUST witness your signature of the above statement. DO NOT SIGN this document until you are physically in the presence of a UNR FAA. (Required Document(s):** Student must present an unexpired valid, government issued photo ID, such as, but not limited to, a **driver's license, state issued ID, or Passport.** A copy of the presented ID **MUST** accompany this document at its submission in person. **NO electronic copies will be accepted.)**

FAA Signature:

Date:

Public Notary: The notary **MUST witness your signature of the above statement. DO NOT SIGN this document until you are physically in the presence of the notary. (Required Document(s):** Student must present an unexpired valid, government issued photo ID, such as, but not limited to, a **driver's license, state issued ID, or Passport.** A copy of the presented ID **MUST** accompany this document at its submission in person. **NO electronic copies will be accepted.)**

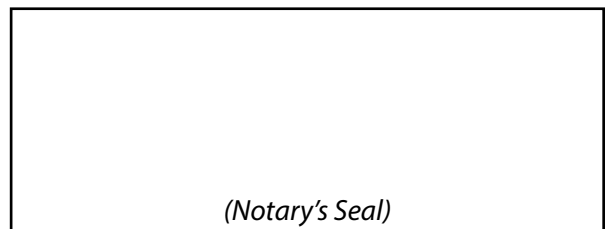
Notary's Certificate of Acknowledgment

In the State of _____ and City/County of _____
 On _____ (date), before me, _____ (Notary's Name),
 personally appeared, _____ (Signer's Name), and proved to me because of
 satisfactory evidence of identification, _____ (Type of ID Provided to Notary), to be
 the above named person who signed the forgoing instrument.

WITNESS my hand and official seal,

Notary Signature:

My commission expires on _____ (Date of Expiration)



SUBMIT COMPLETED DOCUMENTS TO
(electronic submission not accepted)

MAIL: University of Nevada, Reno - Financial Aid
MS 0076
Reno, Nevada 89557-0076

IN PERSON: Office of Financial Aid and Scholarships
3rd Floor
Fitzgerald Student Services Building