

**Independent Student
Family Verification Worksheet
2026-2027**



Student's Name: _____

HC ID# or last 4# of SSN: _____

We have received your 2026-2027 Free Application for Federal Student Aid (FAFSA). Your FAFSA was selected for a process called "Verification". Hastings College is required by federal regulation to collect information to verify that the FAFSA is accurate. Any correction made based on this documentation will be reported to you by the Federal Student Aid Center on an updated Student Aid Report.

Family Size:

Please list the following people below:

1. The student
2. The student's spouse, if applicable
3. The student's dependent children if the following are true:
 - They live with the student (or live apart because of college enrollment)
 - They receive more than half of their support from the student, and
 - They will continue to receive more than half their support from the student during the award year
4. Other persons if the following are true:
 - They live with the student
 - They receive more than half of their support from the student, and
 - They will continue to receive more than half their support from the student during the award year.

Full Name	Date of Birth	Relationship to Student (check appropriate choice)	College Name City and State	Will be enrolled at least half time in 2026-2027
		Self	Hastings College Hastings, NE	Yes
		<input type="checkbox"/> Spouse		
		<input type="checkbox"/> Child		
		<input type="checkbox"/> Child		
		<input type="checkbox"/> Other _____		
		<input type="checkbox"/> Child		
		<input type="checkbox"/> Other _____		
		<input type="checkbox"/> Child		
		<input type="checkbox"/> Other _____		

Please list additional family members on the back of this form including all information required.

*Marital Status Change: If you are currently going through a divorce or separation or have been widowed since filing the FAFSA or completing your 2024 joint tax return, please contact your Financial Aid Counselor. This change may impact your financial aid.

I certify that all of the information reported to qualify for Federal/State student aid is complete and correct. My signature indicates I understand if I purposely give false or misleading information, I may be fined, sent to prison or both.

*All signatures must be physical signatures, digital and typed signatures will not be accepted.

Student Signature

Date

Phone number

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