



# LA ROCHE UNIVERSITY

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## 2026-2027 Dependent Verification Worksheet

### A. Student Information

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Student ID \_\_\_\_\_

Phone Number \_\_\_\_\_

### B. Household Information

1. Write the names, ages and relationship to **YOU (THE STUDENT)** of all the people in your parent(s) household.  
**Include the following:**
  - Yourself (even if you do not currently live with your parents);
  - Your parent(s) or stepparent (if remarried);
  - Your sibling(s), or stepparent's other children, if your parent(s) will provide more than half of their financial support from July 1, 2026 through June 30, 2027;
  - Other people that live in your household and your parent(s) provide more than half of their financial support and will continue to provide more than half of their financial support through June 30, 2027.
2. Indicate which household members (excluding parents) will be enrolled in college at least half-time (six or more credits) and where they will be attending during the 2026-27 academic year.

Full Name	Age	Relationship	College	Enrolled at least Half-time?
		<i>Self</i>	<i>La Roche University</i>	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

\*\*\* If more space is needed, attach a separate page with the student's name and ID at the top \*\*\*

### C. Student Tax and Income Information

Did the student file a 2024 Federal Tax Return?  **YES** – Complete **BOX 1**  **NO** – Complete **BOX 2**

\*\*\* FOR STUDENT TAX FILERS ONLY \*\*\*

#### BOX 1 – check **ONE** box below:

The student **used the FAFSA-Direct Data Exchange (DDX)** to report 2024 IRS income tax return information on the FAFSA website.

The student **did not use the FAFSA-Direct Data Exchange (DDX)** and will provide a 2024 IRS Tax Return Transcript.

Did the student have an IRA/pension/annuity **ROLLOVER** in 2024?  **NO**  **YES** – provide supporting documentation

\*\*\* FOR STUDENT NON-TAX FILERS ONLY \*\*\*

**BOX 2 – check ONE box below:**

- The student **WAS NOT** employed & had **NO** income earned from work in 2024.
- The student was employed in 2024 and has provided documentation of all employers, the amount earned from each, and the corresponding W2 form.

**\*\*\* Non-tax filers must provide copies of all 2024 W-2 forms issued by their employer(s) \*\*\***

Employer's Name	Amount Earned	W2 Provided
	\$	<input type="checkbox"/>
	\$	<input type="checkbox"/>

**\*\* If more space is needed, attach a separate page with the student's name and ID at the top \*\***

**D. Parent Tax and Income Information**

Did the parent(s) file a 2024 Federal Tax Return?  **YES** – Complete **BOX 3**    **NO** – Complete **BOX 4**

\*\*\* FOR PARENT TAX FILERS ONLY \*\*\*

**BOX 3 – check ONE box below:**

- The parent(s) **used the FAFSA-Direct Data Exchange (DDX)** to report 2024 IRS income tax return information on the FAFSA website.
- The parent(s) **did not use the FAFSA-Direct Data Exchange (DDX)** and will provide a 2024 IRS Tax Return Transcript.

Did the parent(s) have an IRA/pension/annuity ROLLOVER in 2024?  **NO**    **YES** – provide supporting documentation

\*\*\* FOR PARENT NON-TAX FILERS ONLY \*\*\*

**BOX 4 – check ONE box below:**

- The parent(s) **WAS/WERE NOT** employed & had **NO** income earned from work in 2024. *Parent non-tax filers must obtain and provide a Verification of Non-filing letter from the IRS, visit [www.larochef.edu/forms](http://www.larochef.edu/forms) for more information.*
- The parent(s) was/were employed in 2024 and has/have provided documentation of all employers, the amount earned from each, and the corresponding W2 form.

**\*\*\* Non-tax filers must provide copies of all 2024 W-2 forms issued by their employer(s) \*\*\***

Employer's Name	Amount Earned	W2 Provided
	\$	<input type="checkbox"/>
	\$	<input type="checkbox"/>
	\$	<input type="checkbox"/>

**\*\* If more space is needed, attach a separate page with the student's name and ID at the top \*\***

**E. Certification**

By signing below, I (we) certify that all information reported to qualify for Federal student aid is complete and accurate.

Student's Signature

Date

Parent's Signature

Date