

Xavier University of Louisiana Office of Student Financial Aid 1 Drexel Drive Box 40 New Orleans, LA 70125-1098

Telephone: (504) 520-7835 FAX: (504) 520-7906 Email: finaid@xula.edu

2023–2024 Verification

Dependent Student Tax Return Non-Filer

Your 2023–2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you (and your parent(s)) reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this form, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed. Please monitor your XULA email for any correspondences.

A.	Student's Information	n (please print)				
Student's Last Name Student's First Name Student's M.I.				Student's X	Student's XULA Student ID Number	
Stuc	dent's Street Address (in	clude apt. no.)		Student's X	KULA Email Address	
City	7	State	Zip Co	de		
Stuc	dent's Home Phone Nun	nber (include area code)		Student's A	Alternate or Cell Phone Number	
	Student's section. Chec The student was not The student was en 2021, and whether 2021 W-2s, Form	ot employed and had no income nployed in 2021 and has listed to an IRS Form W-2, Form 1099,	earned from work in below the names of a or other equivalent of ment(s) issued to you	1 2021. Il sources, the and	nount earned from each source in	
		Employer's Name		2021 Amount Earned	IRS Form W-2, Form 1099, or equivalent document attached?	
	Suzy's Auto Body Sho	op (example)		\$2,000.00	Yes	
		Total Amount of Income Earn	ed from Work	\$		

Student's Name:	XULA Student ID #
Certification and Signature	
I certify that all of the information reported on this for and correct.	WARNING: If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.
• The student must sign this form.	
Student's Signature	Date
Parent's Signature	