



2026–2027
Independent Student Verification Worksheet
Tracking Group V4 – Custom Verification

Your Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The financial aid administrator at your school must compare your FAFSA information with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. Verification must be completed before your financial aid can be finalized and before any federal aid may be disbursed to you. You must complete and sign this worksheet, 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.

A. STUDENT INFORMATION

Student's Last Name	Student's First Name	Student's M.I.	Student's UCSF ID Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Primary Phone Number (include area code)			Alternate Phone Number, if applicable

B. STUDENT'S HOUSEHOLD INFORMATION

List the people in your household below. Include:

- Yourself (1st row below).
- Your spouse, if you are married.
- Your children, if you or your spouse will provide more than half of their support from July 1, 2026, through June 30, 2027, even if they do not live with you.
- Other people if they now live with you AND you provide more than half of their support AND will continue to provide more than half of their support through June 30, 2027.

For any household member who will be enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2026, and June 30, 2027, include the name of the college.

Full Name	Age	Relationship To Student	College To Attend in 2024-25*	Will be Enrolled at Least Half Time* (Yes or No)
		<i>Student-Self</i>	<i>UCSF</i>	

*The school may require additional documentation to verify any household member's enrollment in an eligible postsecondary educational institution.

C. SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) BENEFITS VERIFICATION

Did you or a member of your household listed in Section B of this worksheet received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during the 2024 or 2025 calendar year? SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243). The school may require documentation of the receipt of SNAP benefits during 2024 and/or 2025.

Yes No

D. CHILD SUPPORT PAID

Complete this section if you or your spouse paid child support in calendar year 2025.

I, the student, or my spouse who is a member of my household, paid child support in 2025. I have indicated below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names and ages of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2025 for each child.

If asked by the school, I will provide or require additional documentation such as:

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks, money order receipts, or similar records of electronic payments having been made.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name and Age of Child for Whom Support Was Paid	Annual Amount of Child Support Paid in 2025
Total Amount of Child Support Paid\$			

If more space is needed, attach a separate page that includes your name and UCSF ID number at the top.

E. VERIFICATION OF IDENTITY FOR VERIFICATION TRACKING GROUPS V4 AND V5

To complete V4 or V5 identity verification, a student must present an unexpired, valid, government-issued photo identification such as a U.S. passport, a driver's license, or other state-issued ID.

Please select one:

The student appeared in-person and presented acceptable identification to an institutionally authorized individual.

The student was unable to appear in-person and appeared on a video call with institutional personnel and presented the acceptable identification to an institutionally authorized individual.

The student was unable to appear in-person and provided the institution with a copy of the acceptable identification presented to a notary and a signed notary statement.

The student is a confined or incarcerated individual and was verified by an authorized official at the correctional facility where the individual is confined or incarcerated.

CERTIFICATION & SIGNATURE

Each person signing below certifies that all of the information reported is complete and correct.

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

Student's Signature (Required)

Date

Spouse's Signature (Optional)

Date

To Be Completed by Financial Aid Certifying Officer:

Certifying Officer's Signature

Date

Certifying Officer's Name

To Be Signed in the Presence of a Notary

You have been selected by the U.S. Department of Education to verify your identity. If you are unable to appear in-person or meet virtually with a UCSF Student Financial Services representative you must provide:

- (a) A copy of an *unexpired* valid government-issued photo identification such as, but not limited to, a driver's license, other State-issued identification, or passport that is acknowledge in a notary statement or that is presented to a notary; and
- (b) The *original* Independent Student Verification Worksheet Tracking Group V4-Custom Verification

Student's Signature

Date

Student's UCSF ID Number

To Be Completed by Notary Public if Submitting by Mail:

State of _____ City/County of _____

On _____, before me, _____

Personally appear, _____, and proved to me on basis of satisfactory evidence of

identification _____ to be the above named

person who signed the foregoing instrument.

WITNESSED my hand and official seal

(seal) _____

(Notary signature)

My commission expires on _____

(Date)

Mail completed and signed documents to:

**UCSF Student Financial Services
500 Parnassus Avenue MU-201W
San Francisco, CA 94143-0246**