INDEPENDENT



2024-2025 Verification Worksheet

Office of Financial Aid | 900 SE Baker Street | Unit A484 | McMinnville, OR 97128 Phone 503.883.2225 | Fax 503.883.2486 | Email finaid@linfield.edu

Your 2024-2025 FAFSA (Free Application for Fed J.S. Department of Education regulations requi reported on your FAFSA. If you have questions a avoid a delay in finalizing your financial aid.	res Linfield University to verify	y the accuracy of the information you			
A: STUDENT INFORMATION					
Student Name	nt NameLinfield ID				
Student Phone Number	Student Email _	_ Student Email			
B: FAMILY INFORMATION					
ist the people in your <u>household</u> including:					
2024, through June 30, 2025, even if the	ey do not with live you. Do no and you and your spouse pro	ovide more than half of their support and			
Please list the people in your parent(s) househo	old below:				
Full Name	Age	Relationship			
		Self			
		Spouse (if applicable)			