

**Louisiana Christian University**

Office of Financial Aid

1140 College Drive | LC Box 582 | Pineville, LA 71359

Phone: (318) 487-7386 | Email: financial.aid@lcuniversity.edu

## **2026–2027 Independent V1 Verification Worksheet**

*Federal regulations require students selected for Verification Group V1 to confirm the accuracy of household size, number in college, and income information provided on the FAFSA. This worksheet must be completed and returned to the Louisiana Christian University Financial Aid Office along with any required tax or income documentation from the 2024 tax year.*

### **1. Student Information**

|           |        |               |
|-----------|--------|---------------|
| Full Name | LCU ID | Date of Birth |
|           |        |               |
| Phone     | Email  |               |
|           |        |               |

### **2. Household Information**

List the people in your household, including:

- Yourself (the student)
- Your spouse (if married)
- Your children if you provide more than half of their support
- Other individuals if they live with you and you provide more than half of their support

| Full Name | Age | Relationship | College Attending (if applicable) |
|-----------|-----|--------------|-----------------------------------|
|           |     |              |                                   |
|           |     |              |                                   |
|           |     |              |                                   |

Number in College: \_\_\_\_\_

### **3. Student (and Spouse, if applicable) Income Information – 2024 Tax Year**

Select one:

FA-DDX (Direct Data Exchange)   IRS Tax Return Transcript   Will not file and income listed below  
If you did not file taxes, list any income earned from work below:

| Name of Earner | Source of Income | Amount Earned (2024) |
|----------------|------------------|----------------------|
|                |                  |                      |
|                |                  |                      |

### **4. Certification and Signatures**

Each person signing below certifies that all information reported on this worksheet is complete and correct.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

### **5. Comments / Notes**

|  |
|--|
|  |
|  |
|  |
|  |

### **6. For Office Use Only**

Household verified   Number in college verified   Income verified   Conflicts resolved  
Verified by: \_\_\_\_\_ Date: \_\_\_\_\_

*Return completed form to the Louisiana Christian University Financial Aid Office.*