JOHN BROWN UNIVERSITY 2024-2025 FAFSA TAX SCHEDULE VERIFICATION STUDENT FORM

Student Name: ________Student ID: _______

INFORMATION BELOW IS FOR STUDENT TAX RETURN BELONGING TO: _______

1. Which of the schedules below were filed in 2022: (Please select "YES" or "NO" for each schedule)

SCHEDULE 1 YES □ NO □

SCHEDULE 2 YES □ NO □

SCHEDULE 3 YES □ NO □

NOTE: You must provide a drawn signature (using a mouse, stylist, finger, or pen) - not a typed signature.

To Send Documents:

Secure Upload Link: https://www.jbu.edu/financial-aid/upload/

Student Signature_____

Fax: 479.524.7405

Mail: John Brown University – Attn: Financial Aid Office 2000 W. University St, Siloam Springs, AR 72761