## 2023–2024 Verification Worksheet Independent Student – V4

Your 2023–2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. 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.

Student's Last Name	Student's First Name	Student's M.I.	Student's ID Number		
Student's Street Address (inc	clude apt. no.)		Student's Date of Birth		
City	State	Zip Code	Student's Email Address		
Student's Home Phone Num	ber (include area code)		Student's Alternate or Cell Phone Numb		
Student's Name:			ID #:		
B. Certification a	nd Signatures				
			that every question has been answered and the sted upon review of the initial documents		
information reported is	nis worksheet. If married, the	information o	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sent to prison, or both.		
Student's Signature (rec	juired)	Date			
Spouse's Signature (opt	ional)				

Please complete and bring all pages to the Office of Financial Aid.

## Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person at		to	
(Name of Po	stsecondary Educational I	nstitution)	
verify his or her identity by presenting an unexpired val limited to, a driver's license, other state-issued ID, or p ID that is annotated by the institution with the date it was institution authorized to receive and review the student	assport. The institution wi as received and reviewed,	Il maintain a copy of the	student's photo
In addition, the student must sign, in the presence of the provided below.	e institutional official, the	Statement of Educationa	l Purpose
Statement of	of Educational Purpose		
I certify that I	am the individual s	igning this Statement of	Educational
Print Student's Name)			
Purpose and that the Federal student financial assistar	nce I may receive will only	be used for educational	
and to pay the cost of attending(Name of Pos	tsecondary Educational In	stitution)	for 2023–2024.
· ·	·	ŕ	
(Student's Signature) (Da	ite)	(Student's ID Number)	<del></del>
Identity and State	ment of Educational Pur	pose	
	n the Presence of a Nota		
If the student is unable to appear in person at		to verify h	nis or her identity,
(Name or the student must provide to the institution:	f Postsecondary Education	nal Institution)	
<ul> <li>(a) A copy of the unexpired valid government-issued p statement below, or that is presented to a notary, s or passport; and</li> </ul>			
(b) The original Statement of Educational Purpose, wh separate page than the Statement of Educational F Educational Purpose was the document notarized.			
Notary's Certif	icate of Acknowledgeme	<u>!nt</u>	
State of			
City/County of, before me,		<del></del>	
(Date)	(Notary's name)	······································	
	,and	d provided to me	
(Printed name of	signer) ,and	•	
on basis of satisfactory evidence of identification,  (Type	of government-issued pho	oto ID provided)	
to be the above-named person who signed the foregoin	ig msuument.		
WITNESS my hand and official seal			
	Notary signature & date	<del></del>	
	Commission Expiration	Date	_