

FORM TITLE: HOUSEHOLD SIZE AND NUMBER IN COLLEGE

FORM USE: Used to verify the student's family household and family members enrolled in college.

INSTRUCTIONS:

Section A: Student Information (please print)

1. Student's name: Last, first and middle initial.
2. Student's address: Street, city, state, and zip code.
3. Student's Social Security Number (last 4 –digits only).
4. Student's email address.
5. Student's home phone number and alternate/cell phone number.

Section B: Family Information

6. Include anyone whom you will support (including yourself) or anyone whom your parents will support (including yourself and your parents), between July 1 and June 30 of the appropriate award year. If any of these persons will be attending a college during that time period (enrolled at least half time), list the college they will attend.

Section C: Signatures

7. The student and at least one parent (if dependent student) are required to sign and date here. If student is married, a spouse's signature is optional.

PROCESSING INSTRUCTIONS:

This form is to be retained in the student's financial aid file as a verification source document. All student information and household information must be answered.

COMMENTS:

Verification is not complete until the form has been collected, compared to the application information and conflicting data resolved through either accuracy, tolerance, calculation or reprocessing.

2015–2016 Verification

Household Size and Number in College

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you (and your parents or spouse, if applicable) reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this form, 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's Information (please print)

Student's Last Name

Student's First Name

Student's M.I.

Student's SSN (Last 4-digits)

Student's Street Address (include apt. no.)

Student's Email Address

City

State

Zip Code

Student's Home Phone Number (include area code)

Student's Alternate or Cell Phone Number

B. Student's Family Information

List below the people in your household (or parent's household if dependent student).

➤ **Independent Student's Family Information (Include)**

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half more than half of their support from July 1, 2015, through June 30, 2016, or if the child would be required to provide your information if they were completing a FAFSA for 2015–2016. Include children who meet either of these standards, 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, 2016.

➤ **Dependent Student's Family Information (Include)**

- You and your parent(s) (including a stepparent) even if you don't live with your parent(s).
- Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2015, through June 30, 2016, or if the other children would be required to provide parental information if they were completing a FAFSA for 2015–2016. Include children who meet either of these standards, even if they do not live with your parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2016.

Include the name of the college for any household member who will be enrolled at least half time, in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2015, and June 30, 2016. If you are a dependent student, do not include college information for your parents. *If more space is needed, attach a separate page with your name and last 4-digits of your Social Security Number at the top.*

Student's Name: _____

SSN (Last 4-digits): _____

| Full Name | Age | Relationship | College | Will be Enrolled at Least Half Time |
|-----------------------------|-----------|--------------|---------------------------|-------------------------------------|
| <i>Marty Jones(example)</i> | <i>28</i> | <i>Wife</i> | <i>Central University</i> | <i>Yes</i> |
| | | <i>Self</i> | | |
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C. Certification and Signature

I certify that all of the information reported on this form is complete and correct.

- The student must sign this form.
- If married, the spouse's signature is optional.
- If dependent student, at least one parent must sign.

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

 Student's Signature

 Date

 Spouse's Signature

 Date

 Parent's Signature

 Date

FORM TITLE: TAX RETURN NON-FILER

FORM USE: Used to verify if the student (and spouse, if applicable) and/or the student's parent(s) (if dependent student) will not file and are not required to file a 2014 income tax return with the IRS.

INSTRUCTIONS:

Section A: Student Information (please print)

1. Student's name: Last, first and middle initial.
2. Student's address: Street, city, state, and zip code.
3. Student's Social Security Number (last 4 –digits only).
4. Student's email address.
5. Student's home phone number and alternate/cell phone number.

Section B: Income Information

- 6a. (Student, and spouse if applicable) – Complete if the student (and spouse, if applicable) will not file an income tax return with the IRS for the previous year. Check the appropriate box and, if applicable, list all employees and record the amount earned from each employer in the previous calendar year. Attach copies of all W-2 forms issued by employers.
- 6b. (Parent – Dependent students only) - Complete if the parent will not file an income tax return with the IRS for the previous year. Check the appropriate box and, if applicable, list all employees and record the amount earned from each employer in the previous calendar year. Attach copies of all W-2 forms issued by employers.

Section C: Signatures

7. The student must sign and date here. If married, the spouse's signature/date is optional (unless the student filed taxes and the spouse is a non-filer or if student and spouse married after the end of the tax year). If student is a dependent, the parent that is the non-filer must sign and date. If neither parent files a tax return, both parents must sign and date.

PROCESSING INSTRUCTIONS:

This form is to be retained in the student's financial aid file as a verification source document. All student information and household information must be answered.

COMMENTS:

Verification is not complete until the form has been collected, compared to the application information and conflicting data resolved through either accuracy, tolerance, calculation or reprocessing.

2015–2016 Verification Tax Return Non-Filer

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you (and your parent(s) or spouse, if applicable) reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this form, 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's Information (please print)

| | | | |
|---|----------------------|----------------|--|
| Student's Last Name | Student's First Name | Student's M.I. | Student's SSN (Last 4-digits) |
| Student's Street Address (include apt. no.) | | | Student's Email Address |
| City | State | Zip Code | |
| Student's Home Phone Number (include area code) | | | Student's Alternate or Cell Phone Number |

B. Income Information - Tax Return Non-Filers

Complete this section if you, the student (and, if married, your spouse), and/or the student's parent(s) (if dependent student) will not file and are not required to file a 2014 income tax return with the IRS.

Student (and spouse, if applicable) section. Check the box that applies:

- The student (and, if married, the student's spouse) was not employed and had no income earned from work in 2014.
- The student (and/or the student's spouse if married) was employed in 2014 and has listed below the names of all employers, the amount earned from each employer in 2014, and whether an IRS W-2 form is attached. Attach copies of all 2014 W-2 forms issued to you (and, if married, to your spouse) by employers. *List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, attach a separate page with your name and last 4-digits of your SSN at the top.*

| Employer's Name | 2014 Amount Earned | IRS W-2 Attached? |
|--|--------------------|-------------------|
| <i>Suzy's Auto Body Shop (example)</i> | <i>\$2,000.00</i> | <i>Yes</i> |
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Student's Name: _____

SSN (Last 4-digits): _____

Parent section (Dependent students only). Check the box that applies:

- The parent(s) was not employed and had no income earned from work in 2014.
- The parent(s) was employed in 2014 and has listed below the names of all the parent(s) employers, the amount earned from each employer in 2014, and whether an IRS W-2 form is attached. Attach copies of all 2014 W-2 forms issued to the parent(s) by employers. *List every employer even if the employer did not issue an IRS W-2 form. If more space is needed, attach a separate page with the student's name and the last 4-digits of their SSN at the top.*

| Employer's Name | 2014 Amount Earned | IRS W-2 Attached? |
|--|--------------------|-------------------|
| <i>Suzy's Auto Body Shop (example)</i> | <i>\$2,000.00</i> | <i>Yes</i> |
| | | |
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C. Certification and Signature

I certify that all of the information reported on this form is complete and correct.

- The student must sign this form.
- If married, the spouse's signature is optional (unless the student filed taxes and the spouse is a non-filer or if student and spouse married after the end of the tax year).
- If dependent student, the parent that is the non filer must sign.
 If neither parent filed a tax return, both parents must sign this form.

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

 Student's Signature

 Date

 Spouse's Signature

 Date

 Parent's Signature

 Date

 Parent's Signature

 Date

FORM TITLE: CHILD SUPPORT PAID

FORM USE: Used to verify if the student (or spouse, if applicable) or the student's parent(s) (if dependent student) paid child support in 2014.

INSTRUCTIONS:

Section A: Student Information (please print)

1. Student's name: Last, first and middle initial.
2. Student's address: Street, city, state, and zip code.
3. Student's Social Security Number (last 4 –digits only).
4. Student's email address.
5. Student's home phone number and alternate/cell phone number.

Section B: Child Support Paid

6. Check the appropriate box if you (or your spouse, if married) or one of the student's parents (if Independent student) paid child support in 2014. List:
 - the name of the person who paid the child support
 - the names of the person for whom child support was paid
 - the name and age of the child for whom support was paid, and
 - the total annual amount of support that was paid in 2014 for each child.

Attach copies of all documentation of the child support payment.

Section C: Signatures

7. The student must sign and date here. If married, the spouse's signature and date is optional. If student is a dependent, at least one parent must sign and date.

PROCESSING INSTRUCTIONS:

This form is to be retained in the student's financial aid file as a verification source document. All student information and household information must be answered.

COMMENTS:

Verification is not complete until the form has been collected, compared to the application information and conflicting data resolved through either accuracy, tolerance, calculation or reprocessing.

2015–2016 Verification Child Support Paid

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you (and your parent(s) or spouse, if applicable) reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this form, 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's Information (please print)

| | | | |
|---|----------------------|----------------|--|
| Student's Last Name | Student's First Name | Student's M.I. | Student's SSN (Last 4-digits) |
| Student's Street Address (include apt. no.) | | | Student's Email Address |
| City | State | Zip Code | |
| Student's Home Phone Number (include area code) | | | Student's Alternate or Cell Phone Number |

B. Child Support Paid

Complete this form if you (or your spouse, if married) or one of the student's parents (if dependent student) paid child support in 2014. Check the box that applies:

- Either I, or if married, my spouse paid child support in 2014. I have indicated below the name of the person who paid the child support, the name of the person to whom the child support was paid, the names and ages of the children for whom child support was paid, and the total annual amount of child support that was paid in 2014 for each child. If asked by my school, I will provide documentation of the payment of child support. *If you need more space, attach a separate page that includes your name and the last 4-digits of your Social Security Number at the top.*
- One (or both) of my parents, that are included in my household reported on the FAFSA, paid child support in 2014. The parent has indicated below the name of the person who paid the child support, the name of the person to whom the child support was paid, the names and ages of the children for whom child support was paid, and the total annual amount of child support that was paid in 2014 for each child. If asked by the school, I will provide documentation of the payment of child support. *If you need more space, attach a separate page that includes the student's name and the last 4-digits of your Social Security Number at the top.*

Student's Name: _____

SSN (Last 4-digits): _____

| 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 | Amount of Child Support Paid in 2014 |
|---------------------------------------|---|---|--------------------------------------|
| <i>Marty Jones(example)</i> | <i>Chris Smith</i> | <i>Terry Jones – 7yrs</i> | <i>\$6,000.00</i> |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total Amount of Child Support Paid | | | \$ |

NOTE: If neither you or your spouse or parents, if applicable, paid child support in 2014, please contact your Financial Aid Office for further instructions.

C. Certification and Signature

I certify that all of the information reported on this form is complete and correct.

- The student must sign this form.
- If married, the spouse's signature is optional.
- If dependent student, at least one parent must sign.

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

 Student's Signature

 Date

 Spouse's Signature

 Date

 Parent's Signature

 Date

FORM TITLE: SNAP – SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM

FORM USE: Used to verify if the student or anyone in the household received SNAP in 2013 or 2014.

INSTRUCTIONS:

Section A: Student Information (please print)

1. Student's name: Last, first and middle initial.
2. Student's address: Street, city, state, and zip code.
3. Student's Social Security Number (last 4 –digits only).
4. Student's email address.
5. Student's home phone number and alternate/cell phone number.

Section B: SNAP

6. Check the appropriate box if you or anyone in your household received SNAP in 2013 or 2014.

Note: Your school may ask you to provide documentation if someone in the household received SNAP.

Section C: Signatures

7. The student must sign and date here. If married, the spouse's signature and date is optional. If student is a dependent, at least one parent must sign and date.

PROCESSING INSTRUCTIONS:

This form is to be retained in the student's financial aid file as a verification source document. All student information and household information must be answered.

COMMENTS:

Verification is not complete until the form has been collected, compared to the application information and conflicting data resolved through either accuracy, tolerance, calculation or reprocessing.

2015–2016 Verification

SNAP – Supplemental Nutrition Assistance Program

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you (and your parent(s) or spouse, if applicable) reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this form, 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's Information (please print)

| | | | |
|---|----------------------|----------------|--|
| Student's Last Name | Student's First Name | Student's M.I. | Student's SSN (Last 4-digits) |
| Student's Street Address (include apt. no.) | | | Student's Email Address |
| City | State | Zip Code | |
| Student's Home Phone Number (include area code) | | | Student's Alternate or Cell Phone Number |

B. Supplemental Nutrition Assistance Program (SNAP)

Did you or anyone in your household receive SNAP in 2013 or 2014 (please check the appropriate response below):

Yes No

I understand that if I mark 'Yes', my school may require me to provide documentation that I or someone in my household received SNAP.

C. Certification and Signature

I certify that all of the information reported on this form is complete and correct.

- The student must sign this form.
- If married, the spouse's signature is optional.
- If dependent student, at least one parent must sign.

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

| | |
|---------------------|------|
| Student's Signature | Date |
| Spouse's Signature | Date |
| Parent's Signature | Date |

FORM TITLE: OTHER UNTAXED INCOME

FORM USE: Used to verify the student and/or the student's parent (if dependent student) sources and amounts of other untaxed income for tax year 2014.

INSTRUCTIONS:

Section A: Student Information (please print)

1. Student's name: Last, first and middle initial.
2. Student's address: Street, city, state, and zip code.
3. Student's Social Security Number (last 4 –digits only).
4. Student's email address.
5. Student's home phone number and alternate/cell phone number.

Section B: Student Income Instructions

- 6a. (Student/Spouse) Please check each item in Table A as it applies and the total amount.
- 6b. (Parent) If parental information was required on the FAFSA, please report any untaxed income they received. Please check each item in Table A as it applies.

Table A: Untaxed Income Items

7. Check the item(s) that apply and enter the total amount applicable for calendar year 2014.

Section C: Additional Information

8. Add any other resources, benefits, and amounts received by the student and any other members of the student's household.

Section D: Signatures

9. The student must sign and date here. If student is a dependent, the parent (at least one) must sign and date.

Note: Also attach any copies of W-2s if the student/parent indicated there was income from work.

PROCESSING INSTRUCTIONS:

This form is to be retained in the student's financial aid file as a verification source document. All student information and household information must be answered.

COMMENTS:

Verification is not complete until the form has been collected, compared to the application information and conflicting data resolved through either accuracy, tolerance, calculation or reprocessing.

2015–2016 Verification Other Untaxed Income

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you (and your parent(s) or spouse, if applicable) reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this form, 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's information (please print)

Student's Last Name Student's First Name Student's M.I.

Student's SSN (Last 4-digits)

Student's Street Address (include apt. no.)

Student's Email Address

City State Zip Code

Student's Home Phone Number (include area code)

Student's Alternate or Cell Phone Number

B. The instructions and certifications below apply to the student (and spouse, if married) and parent(s) (if a dependent student) for verification of Other Untaxed Income for 2014.

- 1) **Student/Spouse:** Please check each item in Table A as it applies to the student (and the student's spouse, if married) and the amount (enter the combined amounts for you and your spouse).
- 2) **Parent(s):** If the student was required to provide parental information on the FAFSA, you will also need to report any untaxed income received by your parent(s). Please check each item in Table A as it applies to the student's parent(s) and the amount.

To determine the correct annual amount for each item: If you paid or received the same dollar amount every month in 2014, multiply that amount by the number of months in 2014 you paid or received it. If you did not pay or receive the same amount each month in 2014, add together the amounts you paid or received each month.

If more space is needed, provide a separate page with the student's name and SSN (last 4-digits) at the top.

Student's Name: _____

SSN (Last 4-digits): _____

Table A

| (X) | Untaxed Income Item | Description | Total Amount in 2014 | |
|-----|--|---|----------------------|--|
| | | | Student/Spouse | Parent(s) |
| | (A) Payments to tax-deferred pension and retirement savings | List any payments (direct or withheld from earnings) to tax-deferred pension and retirement savings (e.g., 401(k) or 403(b) plans), including, but not limited to, amounts reported on W-2 forms in Boxes 12a through 12d with codes D, E, F, G, H, and S | | |
| | (B) Child support received | List the actual amount of any child support received in 2014 for the children in your household. Note: Do not include foster care payments, adoption payments, or any amount that was court-ordered but not actually paid. | | |
| | (C) Housing, food, and other living allowances paid to members of the military, clergy, and others | Include cash payments and/or the cash value of benefits received. Note: Do not include the value of on-base military housing or the value of a basic military allowance for housing. | | |
| | (D) Veteran's non-educational benefits | List the total amount of veteran's non-educational benefits received in 2014. Include Disability, Death Pension, dependency and Indemnity Compensation (DIC), and/or VA Educational Work-Study allowances. Note: Do not include federal veteran's educational benefits such as: Montgomery GI Bill, Dependents Education Assistance Program, VEAP Benefits, Post-9/11 GI Bill. | | |
| | (E) Other untaxed income | List the amount of other untaxed income not reported and not excluded elsewhere on this form. Include untaxed income such as workers' compensation, disability, Black Lung Benefits, untaxed portions of health savings accounts from IRS Form 1040 Line 25, Railroad Retirement Benefits, etc. Do not include any items reported or excluded in A – D above. In addition, do not include student aid, Earned Income Credit, Additional Child Tax Credit, Temporary Assistance to Needy Families (TANF), untaxed Social Security benefits, Supplemental Security Income (SSI), Workforce Investment Act (WIA) educational benefits, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion, or credit for federal tax on special fuels. | | |
| | (F) Money received or paid on the student's behalf | List any money received or paid on the student's behalf (e.g., payment of student's bills) and not reported elsewhere in this table. Enter the total amount of cash support the student received in 2014. Include support from a parent whose information <u>was not</u> reported on the student's 2015–2016 FAFSA, but do not include support from a parent whose information was reported. For example, if someone is paying rent, utility bills, etc., for the student or gives cash, gift cards, etc., include the amount of that person's contributions unless the person is the student's parent whose information is reported on the student's 2015–2016 FAFSA . Amounts paid on the student's behalf also include any distributions to the student from a 529 plan <u>owned by someone other than the student or the student's parents</u> , such as grandparents, aunts, and uncles of the student. | | N/A (This item only pertains to students. You should not report any amounts for your parents). |

Student's Name: _____

SSN (Last 4-digits): _____

C. Additional Information.

So that we can fully understand the student's family's financial situation, please provide below information about any other resources, benefits, and other amounts received by the student and any members of the student's household. This may include items that were not required to be reported on the FAFSA or other forms submitted to the financial aid office, and include such things as federal veterans education benefits, military housing, SNAP, TANF, etc.

If more space is needed, provide a separate page with the student's name and SSN (last 4-digits) at the top.

| Name of Recipient | Type of Financial Support | Amount of Financial Support Received in 2014 |
|-------------------|---------------------------|--|
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D. Certification and Signature

Complete the actions below.

- Attach a copy of IRS Form W-2 for each source of employment income received for tax year 2014.

Note: This is only required if the student/parent indicates there is income earned from work. In the case of individuals who are self-employed, you will need to submit/attach a self-certification of income earned from work.

I certify that all of the information reported on this form is complete and correct.

- The student must sign this form.
- If dependent student, at least one parent must sign.

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

 Student's Signature

 Date

 Parent's Signature

 Date

FORM TITLE: ID/STATEMENT OF EDUCATIONAL PURPOSES

FORM USE: This form enables a student who cannot physically appear in person at the institution to (1) verify their identity to a notary public official and (2) certify that the Federal student financial aid you receive will only be used for educational purposes. This form must be notarized with notary seal of office. The student must provide the school with this original signed and notarized form.

INSTRUCTIONS:

Section A: Student Information (please print)

1. Student's name: Last, first and middle initial.
2. Student's address: Street, city, state, and zip code.
3. Student's Social Security Number (last 4 –digits only).
4. Student's email address.
5. Student's home phone number and alternate/cell phone number.

Section B: Identity / Statement of Educational purposes

6. Student must provide the institution with a copy of a valid government-issued photo ID to verify the student's identity. In addition, they must certify under the Statement of Educational Purpose that they will only use Federal student financial assistance for educational purposes to pay the cost of attending that institution.
 - a. Student's printed name.
 - b. Name of postsecondary educational institution.
 - c. Student's signature and date.
 - d. Student's school ID number

Section C: Notary's Certificate of Acknowledgement

7. The student must physically appear and prove proof of identity (a valid government-issued ID) to a Notary Public official to verify his/her identity. The Notary Public will then annotate the Notary Statement blocks and affix their seal of office.

PROCESSING INSTRUCTIONS:

This form is to be retained in the student's financial aid file as a verification source document. All student information and household information must be answered.

COMMENTS:

Verification is not complete until the form has been collected, compared to the application information and conflicting data resolved through either accuracy, tolerance, calculation or reprocessing.

2015–2016 Verification Identity / Statement of Educational Purposes (This Form Must be Notarized)

Your 2015–2016 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you (and your parent(s) or spouse, if applicable) reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this form, 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's Information (please print)

| | | | |
|---|----------------------|----------------|--|
| Student's Last Name | Student's First Name | Student's M.I. | Student's SSN (Last 4-digits) |
| Student's Street Address (include apt. no.) | | | Student's Email Address |
| City | State | Zip Code | |
| Student's Home Phone Number (include area code) | | | Student's Alternate or Cell Phone Number |

B. Identity / Statement of Educational Purposes

A student must appear in person and present the following documentation to an institutionally authorized individual to verify the student's identity. If an applicant is unable to appear in person, he or she must provide the institution with:

- A copy of a valid government-issued photo identification, such as but not limited to:
 - Driver's license;
 - State issued identification (Non-drivers license);
 - Passport

Important: Student must provide the school with this original signed and notarized form.

Student's Name: _____

SSN (Last 4-digits): _____

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of
(Student's Printed Name)
Educational Purpose and that the federal student financial assistance I may receive will only be used for
educational purposes and to pay the cost of attending _____
(Name of Postsecondary Educational Institution)
for 2015-2016.

Student's Signature

Date

Student's ID Number

C. Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,
(Date) (Notary's Name)

personally appeared _____, and proved to me on basis of
(Student's Printed Name)
satisfactory evidence of identification _____ to be the
(Type of government-issued photo ID provided)
above-named person who signed the foregoing instrument.

WITNESS my hand and official seal
(seal)

(Notary Signature)

My commission expires on _____
(Date)