

2023-2024 Custom Verification Worksheet | Dependent Student

Student First Name: _____

Student ID #: _____

Student Last Name: _____

Certification and Signature

Each person signing below certifies that all the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign below. If during the review process, the Office of Student Financial Aid sees a discrepancy, we understand that corrections to my FAFSA will be submitted directly to the U.S. Department of Education on my behalf. I understand that any corrections may also result in an adjustment to my financial aid package that I have been offered.

Please print and sign completed form.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Check here if the student appeared in person, signed the document in person, and presented one of the following documents (Identification must be an unexpired document):

Date document presented and reviewed: _____

 Valid Driver's license, OR Valid State ID, OR Valid Passport_____
Financial Aid Officer's Printed Name_____
Financial Aid Officer's Signature

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

A. DOCUMENTATION OF IDENTITY/ STATEMENT OF EDUCATIONAL PURPOSE

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

The student must appear in person at _____ to
(Name of Postsecondary Educational Institution)

verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

**Identity and Statement of Educational Purpose
(To Be Signed in the Presence of a Notary)**

If the student is unable to appear in person at _____
(Name of Postsecondary Educational Institution)

to verify his or her identity, the student must provide to the institution:

(a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and

(b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Statement of Educational Purpose

I certify that I _____ am the individual signing
(Print Student's Name)

this Statement of 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 _____ for 2023–2024.

(Name of Postsecondary Educational Institution)

(Student's Signature) (Date)

(Student's ID Number)

Student Name: _____ StudentID #: _____

DOCUMENTATION OF IDENTITY/ STATEMENT OF EDUCATIONAL PURPOSE (Continued from previous page)

**Notary's Certificate of Acknowledgement
Notary's certification may vary by State**

State of _____

City/County of _____

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

personally appeared, _____, and proved to me
(Printed name of signer)

on the basis of satisfactory evidence of identification _____
(Type of unexpired government-issued photo ID provided)
to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(seal) _____

(Notary signature)

My commission expires on _____
(Date)