

Date Received

Verification Group 4, 5

Date Scanned

**2023-2024 IDENTITY AND STATEMENT  
OF EDUCATIONAL PURPOSE  
TO BE SIGNED AT THE COLLEGE**

Your 2023-2024 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 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 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.

**A. Student's Information:**

_____ Student's Last Name	_____ Student's First Name	_____ Student's M.I.	_____ Student ID Number
_____ Student's Street Address (include apt. no.)			_____ Student's Date of Birth
_____ City	_____ State	_____ Zip Code	_____ Student's Email Address
_____ Student's Home Phone Number (include area code)			_____ Student's Alternate or Cell Phone Number

**VERIFICATION OF IDENTITY**

The student is required to provide proof of Identity to \_\_\_\_\_  
(Name of Postsecondary Education Institution)

The student must appear in person at said institution to verify his or her identity by presenting a valid **government-issued photo identification** (ID) such as, but not limited to: 1) Driver's License; 2) State-issued ID; 3) Passport; or 4) other such documentation.

The institution will maintain a copy of the student's photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose on the back of this form (first box). If you are unable to sign at the institution, you may take this form to a Notary to complete and sign in front of them.

**STATEMENT OF EDUCATIONAL PURPOSE**

I certify that I \_\_\_\_\_ am the individual signing this  
(Print Student's Name)

"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)

Signed: \_\_\_\_\_  
Student

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

Date: \_\_\_\_\_

Received Date: \_\_\_\_\_

Employee Name: \_\_\_\_\_ Employee Signature \_\_\_\_\_

**IF YOU ARE UNABLE TO SIGN THIS AT THE INSTITUTION, YOU MUST USE THE FORM ON THE BACK OF THIS DOCUMENT AND SIGN IN FRONT OF THE NOTARY PUBLIC. COMPLETED DOCUMENT AND COPY OF VALID ID MUST BE SUBMITTED TO THE SCHOOL**

**2023-2024 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE  
(To Be Signed With Notary)**

Your 2023-2024 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 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 worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete this form and sign in front of the Notary Public. **You must also provide a copy of a valid government-issued photo identification (ID) such as but not limited to: 1) Driver's License, 2) State-issued ID, 3) Passport, or 4) other such documentation.**

**Student's Information:**

_____	_____	_____	_____
Student's Last Name	Student's First Name	Student's M.I.	Student ID Number
_____			_____
Student's Street Address (include apt. no.)			Student's Date of Birth
_____	_____	_____	_____
City	State	Zip Code	Student's Email Address
_____			_____
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this  
**(Print Student's Name)**

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)**

Signed: \_\_\_\_\_ Date \_\_\_\_\_  
**Student**

Student's SSN: \_\_\_\_\_

**Notary's Certificate of Acknowledgement**

State of \_\_\_\_\_ City/County of \_\_\_\_\_

on \_\_\_\_\_, before me, \_\_\_\_\_  
(Date) (Notary's name)

personally appeared, \_\_\_\_\_, and provided to me  
(Printed name of signer)

on basis of satisfactory evidence of identification \_\_\_\_\_  
**(Type of 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)