

2023-2024 Verification Work-Sheet (V4)

Your application was selected by the U.S. Department of Education for review in a process called "Verification." The Office of Financial Aid must compare your FAFSA with the information you provide on this worksheet and other financial documents. If there are differences between your application information and the documents you submit, your application may need to be corrected. The Office of Financial Aid cannot make any federal financial aid payments available to you or process a student loan request until all verification requirements have been met and the necessary corrections have been made.

Next Steps

- 1. Complete all sections and sign this worksheet in ink.
- 2. Return all requested documents by uploading through SLATE or Self-Service.

A. Student Information (Please Print)

Last name	First name	M.I.	CMSV ID #
Address (include apt	#)		Date of Birth (mm/dd/yyyy)
City	State	Zip Code	Phone # (include area code)

C. Identity & Statement of Educational Purpose

Students have to provide proof of his/her Identity by presenting a valid and unexpired government-issued photo identification (ID) such as, but not limited to, a driver's license, other state-issued ID, or passport.

You may choose option A or B.

A. You may provide the proof by bringing the original document to the Office of Financial Aid and present an unexpired government issued photo identification. Financial Aid Professional who accepted document ______ Date______ (attached annoted copy)

Or

B. If you are unable to present the document in person. You may provide a copy of the unexpired government-issued photo identification that is acknowledged with the notary statement below.

Notary's Certificate of Acknowledgement

State of	City/County of				
On (date),	_, before me (notary name),				
personally appeared (student name), and provided to me on the basis of					
satisfactory evidence of identification (type of unexpired government issu	ued photo ID provided)	to the		
above-named person who signed the fo	oregoing instrument.				
WITNESS my hand and official seal					
Notary Signature					
My commission expires on (date)	-				
	Statement of Ed	ucational Purpose			
The student must sign, in the presence	of the institutional official, the fol	llowing:			
		e individual signing this Statement of Educatior lucational purposes and to pay the cost of atter			
Student Signature			Date		
D. Certification					
	must sign. Warning: If you p	tion reported on this worksheet is com ourposely give false or misleading info	•		
Student Signature			Date		
Parent Signature (dependent stude	nt) or Spouse Signature		Date		
		Usa Outs			
		Use Only			
erification Completed By:					
	Authorized Signature	Date			