

2026-2027 Verification Worksheet (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 require correction. **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 are met and the necessary corrections have been made.**

Next Steps

- Complete all sections and sign this worksheet **in ink**.
- Return all requested documents by uploading through SLATE or [Self-Service](#).

A. Student Information (Please Print)

Last Name	First Name	Middle Initial	UMSV ID #
Address (include apt. #)		Date of Birth (mm/dd/yyyy)	
City	State	ZIP Code	Phone # (incl. Area code)

B. Identity & Statement of Educational Purpose

Student must 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 1 or 2.

1. You may provide proof by presenting an original, unexpired, government-issued photo identification at the Financial Aid Office. The Financial Aid Professional who accepts the document will make an annotated photocopy of your ID for our records and sign below.

OR

2. If you are unable to present the document in person. You may provide a copy of the original, unexpired, government-issued photo identification, **annotated** by the notary, and acknowledged within the notary statement below.

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Statement of Educational Purpose

The student must sign, in the presence of an institutional official (option 1) OR a notary (option 2), the following:

I certify that I (Print Student Name) _____ am the individual signing 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 University of Mount Saint Vincent for 2026–2027.

Student Signature _____

Date _____

C. Acknowledgement by FA Professional ~~OR~~ Notary

Financial Aid Professional's Certificate of Acknowledgement (Must be completed for option 1)

The student, (student name) _____, signed the Statement of Educational Purpose above in my presence and provided to me their (ID type) _____ with expiration date _____ as proof of identity. I have saved an annotated copy of this student ID in the student's file.

Financial Aid Professional Signature _____

Date _____

--- OR ---

Notary's Certificate of Acknowledgement (Must be completed for option 2)

State of _____ City/County of _____

On (date), _____, before me (Notary Name), _____

personally appeared (Student Name) _____, and proved to me because of satisfactory evidence of identification* _____ to be the
(type of unexpired 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) _____.

***Notary: Please provide an annotated copy of the ID presented by the student.**

D. Certification

By signing this worksheet, I [we] certify that all the information reported on this worksheet is complete and correct. If dependent, *at least one parent must sign*. **Warning: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.**

Student Signature _____

Date _____

Parent Signature (Dependent Student) OR Spouse Signature (Independent Student) _____

Date _____