

2017–2018 VERIFICATION WORKSHEET

Independent Student - Tracking Group V4

Your 2017-2018 FAFSA was selected for a process called "verification". Verification is a procedure through which an institution checks the accuracy of the student information reported on the application. The Financial Aid Office will be comparing information from your application against information you provide on this worksheet or with documentation collected by the school. The Department of Education requires that we verify this information before disbursing financial aid. Complete this verification form and submit it to the Financial Aid Office at your primary school.

STUDENT'S INFORMATIO	ON				
LAST NAME	FIRST NAME			SSN or ID NUMBER	
ADDRESS	CITY	STATE	ZIP	DATE OF BIRTH	
EMAIL ADDRESS				(AREA CODE)-PHONE NUMBER	
	ver's license, other state-issued ne presence of the institution		otary, the fo	ollowing English or Spanish Statement:	
	STATEMENT C	OF EDUCATIONA	AL PURPOSE		
I certify that I	Print Name	am the	individual sign	ning this Statement of Educational Purpose ar	
that the Federal student	t financial assistance I may rece	ive will only be us	sed for educat	ional purposes and to pay the cost of	
attendingName of P	ostsecondary Educational Institution	fo	or 2017-2018.		
STUDENT SIGNATURE			DA		
	DECLARACIÓN	N DE PROPÓSIT	O EDUCATIV	<u>′0</u>	
Certifico que yo,	Nombre de Estudiante		, so	oy el individuo que firma esta <i>Declaración de</i>	
<i>Propósito Educativo</i> y q	ue la ayuda financiera federal e	estudiantil que yo	pueda recibi	r, sólo será utilizada para fines educativos	
y para pagar el costo de	asistir aNombre de Instituci	ión Educativa Postsecun	daria	para 2017-2018.	
FIRMA DEL ESTUDIANTE					



3. NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT - Complete this section only if you are unable to appear in person at the Postsecondary Educational Institution. This section must be completed in the presence of a notary.

If you are <u>unable</u> to appear in person at the *Financial Aid Offices of the VCCCD* to verify your identity, you must provide:

- a. A copy of the valid government issued photo identification (ID) that is acknowledged in the notary statement below, such as, but not limited to a driver's license, other state issued ID, or passport; and
- The Statement of Educational Purpose in English/Spanish (section 2 of this worksheet) completed in the presence of a notary; and
- The original Notary's Certificate of Acknowledgement (below):

NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT

	State of						
	City/County of			-			
	On, before me			,			
	Date		Notary's Name				
	personally appeared	Printed Name of Signer	, and proved to me				
	on basis of satisfactory evidence of identification						
	to be the above named person	who signed the foregoing instrument.					
	WITNESS my hand and official	seal:					
Notary Signature							
		My Co	ommission Expires:				
			Date				
4. H	IIGH SCHOOL COMPLETION D	OCUMENTATION – You must provide	one of the following to the Financial Aid Of	fice:			
□ F	High school diploma or official high sc	chool transcript including graduation date					
П Т	he student's General Educational De	velopment (GED) certificate, an official GED	transcript, or a state-authorized high school ed	quivalent certificate			
□ s	tudents who completed secondary education in a foreign country, a copy of the "secondary school leaving certificate" or other similar document*						
	ficial Academic transcript of a completed two-year program acceptable for full credit toward a bachelor's degree						
□ F	or a homeschooled student, the orig						
			*See Financial Aid Office fo	r additional instructions			
5. C	ERTIFICATION & SIGNATURES -T	he person signing this worksheet certifies th	at all of the information reported on it is compl	ete and correct.			
Α	WARNING: If you purposely give false or misleading information on this worksheet you may be fined, be sentenced to jail, or both. If the Fald Officer determines or suspects fraud or forgery all information will be forwarded to the campus Behavior Intervention Care Team (Bit Office of Inspector General of the Department of Education, and/or the local law enforcement agency.						
	STUDENT SIGNATURE		DATE				
	SPOUSE SIGNATURE (optional)		DATE				
V4. p	age 2 of 2	Student's Last Name:	Student ID:				

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