V4 - Custom

2023-2024 Verification Worksheet

Independent

Your FAFSA has been selected by the U.S. Department of Education for a process called Verification. We must compare the information from your FAFSA with the information on this worksheet and any other required documents. If there are differences, we will make the necessary corrections to your FAFSA or contact you for further information.

Student Information				
First Name	M.I. Last Name		Date of Birth	
Street Address (not car	npus address)		Email Address	
City	State	Zip Code	Phone Number	
Identity and St	atement of Educational Pur	pose		
authorize A valid, underiver's lice A signed stended actions Option 2. If the stended accument A copy of a non-driver An original received we award year	ense, military identification, or passpratement certifying that the Federal statement certifying that the Federal statement is unable to appear in personntation: I valid, unexpired government-issued is license, military identification, or protection on the statement signed by the statement because on the statement of the state	entification, such as loort (a copy will be m student financial assiing this school for the , he or she must provide photo identification passport; AND applicant certifying thoses to pay the cost of	but not limited to a driver's license, non- ade and retained by the school); <u>AND</u> stance received will only be used for e 2023-2024 award year. <i>[Attachment A]</i>	
Sign the Works	sheet			
Each person signing below certifies that all of the information reported is complete and correct. The student is required to spouse signature is optional.			WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sent to prison, or both.	
Student Signature REQUIRED			Date	
Spouse Signature			 Date	

Return to: Saint Mary's University of Minnesota, Financial Aid Office, 700 Terrace Heights #5, Winona, MN 55987

Email: financialaid@smumn.edu Fax: 507-457-6997

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

The student must appear in person at Saint Mary's University of Minnesota to 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.

Statement of Educational Purpose

I certify that I	am the individual
(Print St	udent's Name)
	ial Purpose and that the Federal student financial e used for educational purposes and to pay the ersity of Minnesota for 2023-2024.
(Student's Signature)	(Date)
(Student's ID Number)	

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 Saint Mary's University of Minnesota 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	y that I	am the individual
	(Print S	am the individual tudent's Name)
signing	this Statement of Education	nal Purpose and that the Federal student financial
assista	nce I may receive will only b	e used for educational purposes and to pay the
cost of	attending Saint Mary's Univ	versity of Minnesota for 2023-2024.
/C+d at/ a	Circolum	(Data)
(Student's	Signature)	(Date)
(Student's	ID Number)	
	Notary's Certific	cate of Acknowledgement
State of		
City/County of	·	
0	h of a un un	
On	, before m	1 C ,, (Notary's name)
		, and proved to me
personally app	(Pr	inted name of signer)
on hasis of sat	isfactory evidence of identif	fication
on basis or sat	isractory evidence or identifi	(Type of government-issued photo ID provided)
to be the abov	ve-named person who signe	d the foregoing instrument.
WITNESS my h	nand and official seal	
•	(seal)	
		(Notary signature)
My commissio	n expires on	
	(Date)	