



2016-2017 V4 Custom Verification Form

The Department of Education has selected your FAFSA for a review process called *verification*. In this process, the financial aid office will be comparing information from your FAFSA with this worksheet and your IRS Data. Federal regulations require colleges to ask for this information before disbursing federal aid. If there are differences between your application and the documents you provide, your FAFSA information will need to be corrected by your Financial Aid Administrator. **Please read all instructions carefully before completing this form to avoid delaying your financial aid awards.**

INSTRUCTIONS:

1. Make sure to check your Missing Information Checklist on the InSite Portal.
2. Complete all required sections of this worksheet and provide all required documentation and signatures. In order to complete your financial aid file, you may be required to provide supplementary documentation in addition to this verification worksheet.

SECTION A: STUDENT INFORMATION

_____		_____
Last Name	First Name	Student ID Number
_____		_____
Address (include apt. no.)		Date of Birth
_____		(____)_____
_____	_____	_____
City	State	Zip
_____		_____
_____		Phone Number (include area code)

SECTION B: HIGH SCHOOL COMPLETION STATUS

Provide one of the following documents to the financial aid office to confirm the student's high school completion status when the student will begin college in 2016-2017:

- Original high school diploma (a copy must be made by financial aid staff).
- Original General Educational Development (GED) certificate or GED transcript.

OR, provide one of the following documents to the Admissions and Records Office:

- Final official high school transcript (unopened, sealed envelope) that shows the date when the diploma was awarded.
- Official GED transcript.
- For California Homeschool students, a transcript or the equivalent, signed by the parent or guardian of the homeschool student is required.
- For out-of-state homeschool students, a secondary school completion credential for homeschool (other than high school diploma or its recognized equivalent), if state laws requires homeschooled students to obtain that credential.

If you (the student) are unable to obtain the documentation listed above, you must contact the financial aid office.

SECTION C: IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE (TO BE SIGNED AT THE FINANCIAL AID OFFICE)

The student must appear in person at _____ to verify his/her identity by presenting a valid
(Name of Educational Institution)

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 with the date it was received and the name of the official collecting the student's ID. In addition, the student must sign, in the presence of an *Institutional Official, the following:

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 2016-2017.

_____	_____	_____
Student Signature	Date	Student ID Number

***AN INSTITUTIONAL OFFICIAL MUST BE A FINANCIAL AID STAFF MEMBER**

SECTION D: FOOD STAMP (SNAP) VERIFICATION

- Check this box if one of the people included in your household on the FAFSA received benefits from the **Supplemental Nutritional Assistance Program** or SNAP (formerly known as food stamps) anytime in 2015 or 2016.

- No one in my household received food stamps in 2015 or 2016, an error was made on my FAFSA application.

SECTION E: CHILD SUPPORT PAID

- Check this box if someone in your household ***paid child support in 2015***. *Please complete the section below.*
*Note: Children listed below cannot be included in the household unless you are currently supporting them for 2016.
(Provide written statement)

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support was Paid	The Age of the Child	Amount of Child Support Paid in 2015
				\$
				\$
				\$

SECTION F: SIGN THIS WORKSHEET

By signing this form, I/we certify that all the information reported is complete and correct. **Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

Student Signature

Date

Parent Signature (for Dependent Students only)

Date

Financial Aid Office Use Only:

Financial Aid Staff Signature

Date