Student ID #		

2014-2015 V3 Independent Student Verification

Your 2014–2015 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

Student's Last Name	First Name	M.I.		Student's Social Security	Number	
Student's Street Address (include apt. no.)			Student's Date of Birth			
City	State	Zip Code		Student's Email Address		
Student's Home Phone Number (include area code)				Student's Alternate or Cell Phone Number		
the persons who paid the child support was paid,	ne child support, the and the total annua ore space is needed,	names of the perso amount of child su	ons to whom apport that we page that in	dent's household, paid child at the child support was paid, was paid in 2013 for each child succeeding the student's name and Name of Child for Whom S	the names of t d. nd ID number	the children for whom the
Child Support		Support was Paid		Paid Paid		Support Paid in 2013
Note: If we hav	e reason to believe the	t the information reg	arding child su	pport paid is not accurate, we n	nay require addi	tional documentation.
C. Certification and Signature Each person signing below certifies that all of the information repo		eported is co	omplete and correct.	misleading	i: If you purposely give false or g information you may be fined, bo I to jail, or both.	
Student's Signature (Red	quired)		Date			-
Spouse's Signature (Opt	ional)		Date			_

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the financial aid administrator at your school. You should make a copy of this worksheet for your records.

