## 2013-2014 Dependent Custom Verification Worksheet (V4 Group)

Your 2013–2014 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.

A. Student's Info	rmation			
Student's Last Name	First Name	M.I.	Student's Social Security Number	
Student's Street Addres	s (include apt. no.)		Student's Date of Birth	
City	State	Zip Code	Student's Email Address	
Student's Home Phone  B. High School Co			Student's Alternate or Cell Phone Number	
Provide <u>one</u> of the follo 2014. Please indicate w  A copy of the stude	nich item you have	provided:	nt's high school completion status when the student will begin collo	ege in 2013–
			hat shows the date when the diploma was awarded.	
☐ A copy of the stude	ent's General Educa	tional Development (	GED) certificate or GED transcript.	
An academic trans- bachelor's degree.	cript that indicates t	the student successfu	illy completed at least a two-year program that is acceptable for fu	ıll credit toward a
		student to obtain a se a copy of that creden	econdary school completion credential for homeschool (other than atial.	a high school
school diploma or	ts recognized equiv	alent), a transcript or	otain a secondary school completion credential for homeschool (ot the equivalent, signed by the student's parent or guardian, that li successful completion of a secondary school education in a homeso	sts the secondary
If the student is un	able to obtain the d	locumentation listed a	above please indicate here and contact the financial aid office.	
C. Identity and St	atement of Ed	ucational Purpo	Se (To Be Signed at the Institution)	
identification (ID), such student's photo ID that	as, but not limited t is annotated with tl	co, a driver's license, one date it was receive	to verify his or her identity by presenting a valid government-issued other state-issued ID, or passport. The institution will maintain a collect and the name of the official at the institution authorized to collect itutional official, the following:	opy of the
		Stateme	ent of Educational Purpose	
I certify that I financial assistance I ma	am the individual signing this Statement of Educational Purpose and that the federal student I may receive will only be used for educational purposes and to pay the cost of attending Athens State University for 2013-2014.			

Student ID #			
(Student's Signature)	(Date)	(Student's Social Secu	urity Number)
D. SNAP Benefit Verificat	ion		
Program or SNAP (formerly known	ts certify that a member of the parents' as the Food Stamp Program) sometime ng the name used in a state, please call	e during 2011 or 2012. SNAP may b	
<ul> <li>The parents' other children if children would be required to of these standards even if the</li> </ul>	e children do not live with the parents. with the parents and the parents provide	of their support from July 1, 2013 ere completing a FAFSA for 2013—	, through June 30, 2014, or if the other 2014. Include children who meet either and will continue to provide more than
provide documentation	persons listed in Section B of this works of the receipt of SNAP benefits during 2 that the information regarding the receipt of 3	010 and/or 2011.	
child support, the names of the pe	ion  parents included in the household paid parents to whom the child support was paid parent that was paid in 2012 for each ch	aid, the names of the children for v	
If more space is Name of Person Who Paid Child Support	s needed, provide a separate page that Name of Person to Whom Child Support was Paid	includes the student's name and II Name of Child for Whom Suppo Paid	
Note: If we have reason to	believe that the information regarding child	support paid is not accurate, we may r	equire additional documentation
	<b>iture</b> s that all of the information reported is e information was reported on the FAFS		WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.
Student's Signature	Date	e	_
Parent's Signature		2	_

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.



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