Shepherd University 2023-2024 Verification: V4 Custom

Your 2023 – 2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. This form must be completed IN-PERSON either in the Office of Financial Aid, or in the presence of a notary and physically returned to the Office of Financial Aid. Electronic copies/signatures are not acceptable. Please present a valid government-issued photo ID for the process. Your financial aid cannot be packaged until verification is complete. We are required to notify the Department of Education of these results within 60 days of sending you this form. Please attempt to complete and return it within 50 days.

Student's Last Name	Student's First Name	Student's M.I.
Student's Shepherd ID Number	Student's Phone Number	Student's Date of Birth
<u>OPTION #1:</u> To be complete	d in the presence of the Office	of Financial Aid
	Statement of Educational Purpo	se
(Print Stude		al signing this Statement of Educational only be used for educational purposes and to
Student's Signature		Date
	ce of Financial Aid's Certificate of Ackno	_
On, before (Date)	e me, (Financial Aid Advisor	's name)
personally appeared,(, and proved to me on basis of satisfactory (Printed name of signer)	
evidence of identification(Type of unexpi	red government-issued photo ID provide	to be the above-named person who signed ed)
the foregoing instrument.		
	(Fina	 Incial Aid Advisor's signature)

Student's Shepherd ID Number If you are unable to appear in person at Shepherd University to verify your identity, you must provide: 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 *original notarized* Statement of Educational Purpose provided below. **Statement of Educational Purpose** I certify that I _____ am the individual signing this Statement of Educational (Print Student's Name) 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 Shepherd University for 2023-2024. Student's Signature Date **Notary's Certificate of Acknowledgement** State of City/County of (Date) , before me, _____(Notary's name) _____, and proved to me on basis of satisfactory personally appeared, _____ (Printed name of signer) evidence of identification ____ to be the above-named person who signed (Type of unexpired government-issued photo ID provided) the foregoing instrument. WITNESS my hand and official seal (Notary's signature) (seal) My commission expires on _____ (Date)

OPTION #2: To be completed in the presence of a notary

Return to:

Shepherd University Office of Financial Aid P.O. Box 5000, Shepherdstown, WV 25443-5000

WARNING: If you purposely give false or misleading information you may be fined, sentenced to jail, or both.