

## 2019-2020 Verification Worksheet V4 - Custom Group

Your 2019-2020 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. Clark State Community College is required to collect the following information and compare it to the information reported on the FAFSA. If any discrepancies are found, we will make the corrections to your FAFSA. No federal financial aid will be offered until all discrepancies have been resolved and the FAFSA has been corrected.

SECTION A: Student Informat	tion			
Name	ame Student ID Number			
Address				
Street	City	State	Zip	
Home Phone	Work Phone			
SECTION B: High School Com	npletion Status (REQUIRED	))		
Provide one of the following when the student begins colle		student's high school con	npletion status	
<ul> <li>school leaving certificate"</li> <li>A copy of the student's fin was awarded.</li> <li>A state certificate or transcexamination that the State TASC, or other State authors.</li> <li>An academic transcript the program that is acceptable.</li> <li>For a student who was hor secondary school complet its recognized equivalent).</li> <li>For a student who was hor obtain a secondary school diploma or its recognized parent or guardian, that lis statement that the student.</li> </ul>	eed secondary education in or other similar document. It is all official high school transfer received by a student expression received by a student expression at the equivalent examination). It is at indicates the student such as for full credit toward a backweschooled in a state where the concredential for homeschooled.	after the student passed as ant of a high school diplometers at least chelor's degree. The state law requires the strooling (other than a high stronger than a high stronger the stronger than a high	when the diploma  State-authorized a (GED test, HiSET, st a two-year  udent to obtain a chool diploma or re the student to a high school the student's ed and includes a on in a homeschool	
<b>SECTION C: Certification Stat</b>	tement			
I certify that all of the informato the best of my knowledge. any false or fraudulent docum	Furthermore, I affirm that I		-	
Student Signature		Date		
Parent Signature (if parent in	formation is provided)		Date	

## SECTION D: Identity and Statement of Educational Purpose (Required to be signed at the Financial Aid Office)

The student must appear in person at Clark State Community College 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.

Statement of Educational	Purpose		
I certify that I	am the indi	vidual signing this Sta	tement of Educational Purpose
(Print Studer and that the Federal studer purposes and to pay the co	nt financial assistance I		
Student's Signature	<u> </u>	Date	Student's ID Number
OFFICE USE ONLY			
I certify that I have rece	ived a valid copy of un	expired identification.	
Print Financial Aid Staff	Member Name	Signature	Date
<ul><li>the notary statement be license, other state-issu</li><li>The original Statement notary statement appear</li></ul>	d valid government-issuelow, or that is presented ID, or passport; and of Educational Purposed is on a separate page on that the Statement of	ned photo identificationed to a notary, such as provided below, which than the Statement of	on (ID) that is acknowledged in , but not limited to, a driver's th must be notarized. If the Educational Purpose, there e was the document notarized.
State of	City/County o	f	On ,
			and (Printed name of signer)
proved to me on the basis of the above-named person w		(Type of government	to be r-issued photo ID provided)
WITNESS my hand and off	icial seal:		
	My commission ex	pires on	
(Notary signature)		(Date)	(Place Seal Here)