



Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. Federal Title IV aid regulations require that before awarding federal student aid, we may ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information the financial aid office at SCCC will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. The SCCC Office of Financial Aid may also ask for additional information to complete the verification process based upon this review. If you have questions about the verification process, contact our office as soon as possible so that your financial aid will not be delayed.

**A. Student's Information:**

\_\_\_\_\_  
Student's Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
M.I.

\_\_\_\_\_  
Student ID

\_\_\_\_\_  
Phone Number (include area code)

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Date of Birth

**B. Identity and Statement of Educational Purpose - (To Be Signed at the SCCC Office of Financial Aid)**

The student must appear in person at **Seward County Community College** to verify his or her identity by presenting a 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 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 provided below:

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this Statement of Educational Purpose  
(Print Student's Name)

and that the federal student financial assistance I may receive **will only be used for educational purposes and to pay**

**the cost of attending** **Seward County Community College** for 2023-2024

(Name of Postsecondary Educational Institution)

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(School Official Signature)

\_\_\_\_\_  
(Date)

## C. Identity and Statement of Educational Purpose -

(Only to be completed if the student is unable to appear IN PERSON at SCCC Office of Financial Aid)

If the student is unable to appear in person at **Seward County Community College** to verify his or her identity, the student **must** obtain a notary's signature by completing the following:

**(a) A valid government-issued photo identification (ID) that is acknowledged in the notary statement below, must be presented to the notary. Forms of acceptable identification can be, but not limited to a driver's license, other state-issued ID, or passport;**

### Notary's Certificate of Acknowledgment

State of \_\_\_\_\_ City/County of \_\_\_\_\_  
on \_\_\_\_\_ (date) before me, \_\_\_\_\_ (Notary's  
Name) Personally appeared, \_\_\_\_\_ (Printed name of signer) and  
provided to me on basis of satisfactory evidence of identification \_\_\_\_\_ (Type of  
government-issued photo ID provided) to be the above-named person who signed the foregoing instrument  
(specifically the Statement of Educational Purpose on the front page).

**WITNESS my hand and official seal**  
(seal)

\_\_\_\_\_  
(Notary Signature)

My commission expires on \_\_\_\_\_ (Date)

**\*A copy of the student identification must accompany this notarized documentation. \***

## D. Certifications and Signatures

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

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent (for dependent students only) whose information was reported on the FAFSA must sign and date.

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature (required for Dependent Students ONLY)

\_\_\_\_\_  
Date