Concordia University

2023 2024 Verification Worksheet 5

Your Free Application for Federal Student Aid (FAFSA) was selected for a review process called "verification." In this process the Financial Aid Office will compare information you entered on your FAFSaving

  questions unanswered WILL result in an incomplete and returned form. You may need to answer "0" or "N/A" for some questions.

2. Make arrangements to sign section 4 (Identity and Statement of Educational Purpose) in front of a Concordia Financial Aid Administrator. This requires having a valid government issued photo ID with you at the time of signing. **IF YOU ARE UNABLE TO APPEAR IN PERSON AT CONCORDIA UNIVERSITY, YOU WILL NEED TO MAKE ARRANGEMENTS TO SIGN THE V.3(M)-t(en)3.6TnNCOX.2(NT).9(O)-((O)-d4E)2.55(E)5.2o2(NT).-NTEEKrnTd(T)3.3(1 A) IN FRONT OF A NOTARY. APPENDIX A CAN BE FOUND ONLINE AT: https://www.cuw.edu/admissions/financial-aid/forms.html**

3. Mail the completed verification worksheet and, if necessary, Appendix A to the Concordia University Financial Aid Office. **YOU MUST SUBMIT THE ORIGINAL VERIFICATION WORKSHEET – FAXES OR EMAILS WILL NOT BE ACCEPTED.**

Section 1. Student Information

Name: _____   Student ID Number: F00_____

Address: _____   Date of Birth: _____

City, State, Zip: _____   Phone Number: _____

Section 2. Family Information

Write the names of <u>all</u> family members who currently receive more than 50% of their support from either you or your parents. **Dependent** students should list: 1) Themselves 2) Parent(s) 3) Parents' other *dependent* children. This also includes other persons who are supported at least 50% and live in the household. If you need more space please attach a separate page. Please write in the name of the college for any family member, **excluding your parent(s)**, who will be attending college at least half-time between July 1, 2023 and June 30, 2024, and will be enrolled in a degree, diploma, or certificate program. **Independent** students should list their spouse and their *dependent* children.

Full Name	Age	Relationship	College
		Self	Concordia University

(Continued on next page) Æ

Student Name:_____ Student ID:F00_____

Section 3a. Tax Forms and Income Information: Student

STUDENT:

"**Yes**, I did file a 2021 Federal Tax Return and utilized the IRS Data Retrieval Tool on my FAFSA. *If yes, continue with section 4b.*
      OR

"**Yes**, I did file a 2021 Federal Tax Return. I will submit a **signed** 2021 IRS Tax Return Transcript(s) OR a **signed** copy of the 2021 Federal Income Tax Return and applicable schedules.

Student Name:_____ Student ID:F00_____

Section 4. Identity and Statement of Education Purpose

The below statement **must** be signed in front of a Concordia University financial aid administrator or Center Director. If you are unable to appear in person at Concordia, PLEASE SEE Page 1 "What to do" #3.

Identity and Statement of Educational Purpose
(To Be Signed at the Institution)

The student must appear in person at Concordia University 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 provided below.

Statement of Educational Purpose

I certify that I _____ am the individual signing this
                         (Print Student's Name)
Statement of Educational 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 Concordia University for 2023-2024.

_____ _____
       (Student's Signature)   (Date)

Section 5. Certification

By signing this worksheet, I (we) certify that all the information reported above is complete and true to the best of my (our) knowledge and belief. (TYPED SIGNATURES OR DIGITAL SIGNATURES WILL NOT BE ACCEPTED – WET SIGNATURES ONLY.)

Student's Signature:_____Date:_____

Parent's Signature:_____Date:_____
(Dependent Student's only)

Attach copy of <u>unexpired</u> government issued photo ID

Office use only
Verification of signature for Statement of Educational Purpose and verification of match to government issued photo ID.

_____ _____
Financial Aid Administrator/Center Director Name printed   Date

_____
Financial Aid Administrator/Center Director signature