

2024-2025 Verification Worksheet (V4 Notary Pt. 1)

Your 2024–2025 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 worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, 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.

Directions: You (the student) have indicated you are unable to appear in person as required at Gurnick Academy of Medical Arts to verify your identity. You must provide:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as but not limited to a driver's license, other state-issued ID, or U.S. passport; and
- (b) The original notarized Statement of Educational Purpose provided below, which must be notarized.

DO NOT COMPLETE AND SIGN THIS FORM UNTIL YOU ARE IN THE PRESENCE OF THE NOTARY.

A. Student's Information

Student's Last Name, First Name, M.I.

Student's ID Number

B. 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 Gurnick Academy of Medical Arts for 2024-2025.

(Student's Signature)

(Date)

(Student's ID Number)

(Continue to next page for Notary's Certificate of Acknowledgement)

2024-2025 Verification Worksheet (V4 Notary Pt. 2)

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C. Notary's Certificate of Acknowledgement

State of _____ City/County of _____ on _____,
(Date)

before me, _____, personally appeared _____,
(Notary's name) (Printed name of signer)

and proved 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.

WITNESS my hand and official seal _____
(seal) (Notary signature)

My commission expires on _____
(Date)