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2023-2024 Verification Worksheet V4 Dependent

<u>What is Verification?</u> – The Department of Education randomly selects a percentage of students for verification. Before awarding Federal Student Aid, we must collect documentation that we use to verify the information reported on your FAFSA. If there are discrepancies, we may make corrections to your FAFSA based on the documentation you provide. During the verification process we may determine that additional documents need to be submitted.

<u>What do I need to do?</u> - To complete the verification process you should read this worksheet thoroughly and answer all questions. Return the worksheet and all requested documentation to the Office of Student Financial Services as soon as possible to prevent a delay in the processing of financial aid.

Student Name			Date of Birth		LMU Student ID
				1	
Address					
City	State	Zip		Phone	(include area code)
B. Identity/Statement of Educational Purpo	<u></u>				
B. Identity/Statement of Educational Purpo	se				
** NOTE: There are two options for completing the Identity/Statement of Educational Purpose verification. Option A requires that the student sign the Statement of Educational Purpose in the Student Financial Services Office in front of an institutional official. The student will be required to present a valid government-issued photo identification (ID) and the institutional official will collect a copy. If you are unable to visit the Student Financial Services Office in person, you may choose to use Option B. Option B allows the student to submit a copy of his or her valid government-issued photo identification (ID) to the school along with the original notarized Statement of Educational Purpose. Both Option A and Option B are included in this worksheet.					
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Student Name:		Student ID #:	Dependent V4		
B. Option A – Ider	ntity and Statement of Educationa	ll Purpose (To Be Signed a	at the Institution)		
an unexpired valid other state-issued annotated by the	government-issued photo ider ID, or passport. The institution	ntification (ID), such as, will maintain a copy of received and reviewed,	rify his or her identity by presenting but not limited to, a driver's license, the student's photo ID that is and the name of the official at the		
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	(Print Student's Name)	am the indivi	dual signing this Statement of		
Educational Purpos	se and that the Federal student fi	nancial assistance I may	receive will only be used for		
educational purpos	ses and to pay the cost of attendi	ng Lincoln Memorial Uni	versity for 2023-2024.		
(Student's Si	 gnature)	 (Date)	(Student's ID Number)		
For Official Use Only					
Official's Name		Document Title			
Official's Signature Date Received		Issuing Authority Document Number			
Date Neceived		Expiration Date			
		Expiration bate			

Student Name:		Student ID #:	Dependent V4
B. Option B –	Identity and Statement of Ed	ucational Purpose (To Be Signed With	Notary)
f the student is upprovide to the in		ncoln Memorial University to verify his o	or her identity, the student must
		ssued photo identification (ID) that is ack n as, but not limited to, a driver's license,	•
on a separat	-	ose provided below, which must be notar ducational Purpose, there must be a clea arized.	
	Sta	atement of Educational Purpose	
certify that I	(Print Student's Name)	am the individual signing	this Statement of Educational Purpose
and that the Fed	eral student financial assistance	e I may receive will only be used for educ	ational purposes and to pay the cost
of attending Linc	coln Memorial University for 20	23-2024.	
	(Student's Signature)	(Date)	
	(Student's ID Number)	•	
	<u>Notar</u>	y's Certificate of Acknowledgement	
State of		City/County of	
On	, befo	re me,(Notary's name)	
	(Date)	(Notary's name)	
persona		, and	d proved to me
	(Printe	d name of signer)	
because	of satisfactory evidence of ider	ntification(Type of unexpired government	
to be the	e above-named person who sig	ned the foregoing instrument.	
WITNES	S my hand and official seal	(Notary signa	Ture)
My com	mission expires on	· • •	ui C _j
		Date)	

Student Name:	Student ID #:	Dependent V4
C. Signature(s)		
	rmation reported on this form is i	rted is complete and correct. Each person also inconsistent with what has been reported on the
Student's Signature	 Date	WARNING:
		If you purposely give false or misleading information on this worksheet, you may be
Parent's Signature	Date	fined, sent to prison, or both.