PALM BEACH STATE COLLEGE

V4 Verification Form

2016 –2017

Your Free Application for Federal Student Aid was selected for verification. Four items need to be verified:

- Completion of High School or its Equivalent
- Receipt of SNAP Benefits
- Payment of Child Support
- Identity Confirmation and Statement of Education Purpose* (must be completed in person at the College or via notary)

A. Student's Information

Student's Last Name	Student's First Name	Student's M.I.	Student's PBSC ID Number

Student's Street Address (include apt. no.)	Student's Date of Birth

City	State	Zip Code	Student's Email Address

Student's Home Phone Number (include area code)	Student's Alternate or Cell Phone Number

B. Completion of High School or its Equivalent

Provide **one** of the following documents that indicate the student's high school completion status when the student will begin college in 2016-2017:

- A copy of the student's high school diploma.
- A copy of the student's final official high school transcript that shows the date when the diploma was awarded.
- A copy of the student's General Educational Development (GED) certificate or GED transcript.
- An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit toward a bachelor's degree.
- A homeschooled student must provide a Home Education Affidavit

If the student is unable to obtain the documentation listed above, he or she must contact the financial aid office.

☐ Check here if you previously provided this documentation to Palm Beach State College.

Student's Name: _____ PBSC ID: _____

C. Receipt of SNAP Benefits

The signer(s) below certify that a member of the student's household received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2014 or 2015.
A **dependent** student's household includes:

- The student;
- The parents (including a stepparent) even if the student doesn't live with the parents;
- The parents' other children if the parents will provide more than half of their support from July 1, 201*6*, through June 30, 201*7*, or if the other children would be required to provide parental information if they were completing a FAFSA for 201*6*-201*7*. Include children who meet either of these standards even if the children do not live with the parents;
- Other people if they now live with the parents and the parents provide more than half of their support and will continue to provide more than half of their support through June 30, 201*7*.

An **independent** student's household includes:

- The student;
- The student's spouse, if the student is married;
- The student's or spouse's children if the student or spouse will provide more than half of their support from July 1, 201*6*, through June 30, 201*7*, even if the children do not live with the student;
- Other people if they now live with the student and the student or spouse provides more than half of their support and will continue to provide more than half of their support through June 30, 201*7*

Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2014 or 2015.

Check appropriate box:

☐ SNAP benefits were received by a member of the household

☐ SNAP benefits were NOT received by a member of the household.

After reviewing the contents of page 3, please provide your signature on section E.

Student's Name: _____ PBSC ID: _____

D. Child Support Paid

One of the parents included in the household or the student, and/or student's spouse **paid child support** in 2015. List below the names of the persons who **paid** the child support, the names of the persons to whom the child support was **paid**, the names of the children form whom the child support was **paid**, and the total annual amount of child support that was **paid** in 2015 for each child.
If more space is needed, provide a separate page that includes the student's name and ID number at the top.

Name of Person Who **Paid** Child Support	Name of Person to Whom Child Support was **Paid**	Name of Child for Whom Support was **Paid & Age**	Amount of Child Support **Paid** in 2015

Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation, such as:

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks or money order receipts.

E. Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent/spouse whose information was reported on the FAFSA must sign and date.

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

Student's Signature Date

Parent/Spouse's Signature Date

Student's Name: _____ PBSC ID: _____

F. Identity and Statement of Educational Purpose
(To Be Signed at the College)

The student must appear in person at **Palm Beach State College** to verify his or her identity by presenting 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 the name of the official at the institution authorized to collect the student's ID.

In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

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

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 **Palm Beach State College** for 2016-2017.

_____ _____ _____
Student's Signature Student's ID Number Date

_____ _____ _____ _____
Financial Aid Staff Name Financial Aid Staff Signature Title Date

If you are unable to appear in person, see notarized option on the following page.

Student's Name: _____ PBSC ID: _____

G. Identity and Statement of Educational Purpose
(To Be Signed with Notary)

If the student is unable to appear in person at **Palm Beach State College** to verify his or her identity, the student must provide:

a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as, but not limited to, a driver's license, other state-issued ID, or passport; and

b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

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

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 **Palm Beach State College** for 2016-2017.

_____ _____
(Student's Signature) (Date)

_____
(Student's ID Number)

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____
(Date) (Notary's name)

personally appeared _____, 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.

WITHNESS my hand and official seal **My commission expires on**

_____ _____
(seal) (Notary Signature) (Date)