

Benedictine College – Financial Aid

2024–2025 Independent Verification Worksheet - V4

Your 2024–2025 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states that before awarding Federal Student Aid, we may ask you to confirm the information you and your parent(s) reported on your FAFSA. To verify the information you provided, please complete the questions below, include parent(s) and student signature, and mail or fax the form with any required documents to the Financial Aid Office. **Please turn in all documents requested ASAP to avoid delays in processing your Financial Aid.** If you have questions regarding verification, contact us at 913-360-7484 or финаid@benedictine.edu.

Student’s Information

Student’s Last Name	First Name	M.I.	Student’s Last 4 of SSN
Student’s Street Address (include apt. no.)			Student’s Benedictine School ID#
City State Zip Code		Student’s Phone Number	

Identity and Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at _____
(Name of Postsecondary Educational Institution)
to verify his or her identity, **the student must provide to Benedictine College all items below:**

- (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 passport; **and**
- (b) **The original Statement of Educational Purpose**, which is provided below, must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

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.

_____ for 2024–2025.
(Name of Postsecondary Educational Institution)

(Student’s Signature) (Date) (Student ID Number)

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Notary's Certificate of Acknowledgement

State of _____

City/County of _____

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

personally appeared, _____, and provided to me
(Printed name of signer)

on basis of satisfactory evidence of identification _____
(Type of unexpired 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)

Certifications and Signatures

Each person signing below certifies that all the information reported is complete and correct. The student and one parent 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 and/or sentenced to jail.**

Print Student's Name

Student ID Number

Student's Signature

Date

Spouse Signature

Date

**Completed form along with copy of ID witnessed by notary must be mailed to: Benedictine College
Financial Aid Office 1020 N 2nd Street Atchison, KS 66002**

Electronic or faxed copies will not be accepted.