2026-2027 Verification (V4) Worksheet
Independent Student

Your 2026-2027 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. Federal regulations indicate before awarding Federal Student Aid, we must ask you to confirm the information you and your spouse, if applicable, 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.

INSTRUCTIONS:
You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to Student Financial Services. We may ask for additional information.
You must complete sections A, F *and* either B, C, D, *or* E depending on your situation.

A. STUDENT INFORMATION

Student's Full Name: _____ Student ID: _____

Student's Phone Number: _____ Student SSN: _____

B. IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE (Section to Be Signed at The Institution)

The student must appear in person at _____ to verify
(Name of Postsecondary Educational Institution)
his or her identity by presenting a 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.

The student is also required to sign the following document in the presence of an institutional official:

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I, _____, am the individual signing this Statement of
(Print Student's Name)
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 2026-2027.
(Name of Postsecondary Educational Institution)

_____

Student's Signature **Student ID** **Date**

C. Identity and Statement of Educational Purpose (Must Be Submitted by Mail)

Select the option below that applies to you:

☐ **I.** The student was verified by a service provider that is compliant with National Institute of Standards and Technology Identity Assurance Level 2 (NIST IAL2). The institution received acceptable documentation directly from the service provider confirming the date of the verification and that the student's identity was verified under the NIST IAL2 standard; **or**

☐ **II.** The student was unable to appear in person and appeared on a video call with institutional personnel and presented the acceptable identification to an institutionally authorized individual.

The student must also sign and mail the following form to the address on the last page.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I, _____, am the individual signing this Statement of
(Print Student's Name)
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 2026-2027.
(Name of Postsecondary Educational Institution)

D. IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE (Section to Be Signed with Notary)

If the student is unable to appear in person at _____ to

(Name of Postsecondary Educational Institution)

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

(Print Student's Name)

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 2026-2027.

(Name of Postsecondary Educational Institution)

_____

Student's Signature Student ID Date

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 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)

E. Identity and Statement of Educational Purpose for Confined or Incarcerated Individual

(Must Be Submitted by Mail)

If the student is a confined or incarcerated individual and was verified by an authorized official at the correctional facility where the individual is confined or incarcerated.

The student must also sign and mail the following form to the address on the last page.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I, _____, am the individual signing this Statement of

(Print Student's Name)

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 2026-2027.

(Name of Postsecondary Educational Institution)

F. CERTIFICATION AND SIGNATURES

I certify that all the information reported on this worksheet is complete and correct.
The student must sign and date the worksheet.
If married, spouse's signature is optional.

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 - Required *(no typed signature permitted)* Date

_____

Spouse's Signature - Optional *(no typed signature permitted)* Date

SUBMISSION INSTRUCTIONS:

Students completing the Identity and Statement of Educational Purpose at the College (Section B) should visit our office during normal business hours at:
Blaney Hall, Room 105

If the Identity and Statement of Educational Purpose was completed via a NIST IAL2-compliant service provider, video call (Section C), confinement or incarceration (Section E), or by a notary because the student was unable to appear in person at the College (Section D), the original form may be submitted by mail to:
Student Financial Services, 100 College Drive, Allentown, PA 18104

This office accepts original documents only. Copies, including electronic or portal submissions, will not be accepted.

Submission of all requested documents is required for verification to be completed.