



## 24-25 Verification Worksheet V4

Your application was selected by the U.S. Dept. of Education for review in a process called "verification". You must submit this verification worksheet (which needs to be notarized or submitted in person at Sacred Heart, with a copy of an unexpired valid government-issued photo identification).

### A. Step 1: Student Verification

Full Name: \_\_\_\_\_ ID Number: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Alternate/Cell Phone Number: \_\_\_\_\_

### B. Step 2: Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent/spouse must sign and date.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's or Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If there are differences between your application and the documents you've submitted, correction may be needed. We cannot process your federal aid until verification has been completed. Please provide the required documentation within 15 days of starting school or the start of your next academic year as applicable.

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

### C. Step 3: Identity and Statement of Educational Purpose

The student must appear in person at Sacred Heart University to verify his or her identity by presenting an unexpired 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 by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

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

#### Identity and Statement of Educational Purpose

I certify that I \_\_\_\_\_ am the individual signing this 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 Sacred Heart University for 2024-2025.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's ID Number: \_\_\_\_\_

**(Typed or e-signatures are not acceptable. Please print, and actually sign and date this document.)**

The above statement must be signed in the presence of a notary if the student is unable to appear in person at Sacred Heart University to verify his or her identity; the student must provide:

- (a) a copy of an unexpired 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.

#### Notary's Certificate of Acknowledgement

State of \_\_\_\_\_ City/County of: \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_,  
personally appeared, \_\_\_\_\_, and provided to me on basis of  
satisfactory evidence of identification \_\_\_\_\_ to be the above-named  
person who signed the foregoing instrument.



# Sacred Heart UNIVERSITY

Office of Student Financial Assistance

**Witness my hand and official seal.**

**Notary Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**My commission expires on:** \_\_\_\_\_

**Seal:**

**Please submit this Verification Worksheet (*which needs to be notarized or submitted in person at Sacred Heart, with a copy of the valid government-issued photo identification*) to:**

**This document may be submitted to the Office of Student Financial Assistance ONLY via SHUAwards (Menu > Documents & Messages > Upload it now!), secure fax, mail, or in-person as it contains personally identifiable information.**

**5151 Park Avenue, Fairfield, CT 06825 203-371-7980 (*phone*) 203-365-7608 (*secure fax*)**