V4 Independent



2018 - 2019 Independent Student Verification Form

Your 2018-2019 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we must ask you to confirm the information you reported on your FAFSA. Data will be compared from your FASFA application with this form, 2016 Income Tax information and any other requested information for both you and a spouse. Complete and sign this document and submit with other required documents. Respond quickly so that your financial aid will not be delayed.

A. Student's Information

Student's Last Name	First Name M.I.	Last 4 digits of SS 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 N	umber (include area code)	Student's Alternate or Cell Phone Number

B. High School Completion Status

Provide <u>one</u> of the following documents to indicate the student's high school completion status when the student begins college in 2018–2019:

- A copy of the student's high school diploma.
- For students who completed secondary education in a foreign country, a copy of the "secondary school leaving certificate" or other similar document.
- A copy of the student's final official high school transcript that shows the date when the diploma was awarded.
- A state certificate or transcript received by a student after the student passed a State-authorized examination that the State recognizes as the equivalent of a high school diploma (GED test, HiSET, TASC, or other State-authorized examination).
- 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.
- For a student who was homeschooled in a state where state law requires the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized equivalent), a copy of that credential.
- For a student who was homeschooled in a state where state law does not require the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized equivalent), a transcript, or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and includes a statement that the student successfully completed a secondary school education in a homeschool setting.

A student who is unable to obtain the documentation listed above must contact the financial aid office.

C. Identity and Statement of Educat	ional Purpose (To Be Signed at the Institution)
valid government-issued photo identificatio	n (ID), such as, but udent's photo ID th	Ilth Sciences to verify his or her identity by presenting an unexpired not limited to, a driver's license, other state-issued ID, or passport. nat is annotated by the institution with the date it was received and rized to receive and review the student's ID.
In addition, the student must sign, in the pr	esence of the instit	utional official, the Statement of Educational Purpose provided below
D. Identity and Statement of Educat	tional Purpose (To Be Signed in the Presence of a Notary)
provide to the institution: (a) A copy of the unexpired valid governme or that is presented to a notary, such as (b) The original Statement of Educational F separate page than the Statement of Educational Purpose was the document notarized. E. Statement of Educational Purpos I certify that I	ent-issued photo id s, but not limited to curpose provided be ducational Purpose,	e of Health Sciences to verify his or her identity, the student must entification (ID) that is acknowledged in the notary statement below o, a driver's license, other state-issued ID, or passport; and elow, which must be notarized. If the notary statement appears on a, there must be a clear indication that the Statement of Educational must be individual signing this Statement of Educational Purpose will only be used for educational purposes and to pay the
cost of attending Cabarrus <i>College of Healt</i> i	h Sciences for 2018	-2019.
(Student's Signature)	(Date)	(Student's ID Number)
F. Certification and Signatures		
FAFSA data that result from the Verifica	zed Cabarrus Collegation process.	cion reported is complete and correct. ge of Health Sciences to make any changes to the originally reported information you may be fined, sent to prison or both.
Print Student's Name	 Last 4 dig	gits of SS Number
Student's Signature (Required)	 Date	
Spouse's Signature (Optional)	 Date	

Students Name: ______ Students DOB ___/___/

Do not mail this worksheet to the U.S. Department of Education.
You may submit the verification and requested forms to:
Cabarrus College of Health Sciences - Attention: Robin Robinson
401 Medical Park Drive Concord, NC 28025 Phone (704) 403-2445 Fax (704) 403-2077