

Wallace Community College Selma

2023–2024 Institutional Verification Document

Your **2023–2024** 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 may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

A. Student's Information

_____ Student's Last Name	_____ First Name	_____ M.I.	_____ Student's "A" 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. Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person at **Wallace Community College Selma** 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 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 **Wallace Community College Selma** for **2023–2024**.

(Student's Signature) (Date)

(Student's "A" ID Number)

Or

C. 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 Wallace Community College Selma to verify his or her identity, the student must provide to the institution:

- (1) 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
- (2) The original Statement of Educational Purpose provided on the following page, which 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 Statement of Educational Purpose

(Print Student's Name)

and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Wallace Community College Selma for **2023–2024**.

(Student's Signature)

(Date)

(Student's "A" ID Number)

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

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

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

on the 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)

Student's Name: _____ "A" ID: _____

D. Certifications and Signatures

WARNING: If you purposely give false or misleading information you may be fined, be sent to prison, or both.

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

Print Student's Name

Student's "A" ID Number

Student's Signature

Date

Parent's Signature

Date