

2024-2025 Verification Worksheet

Your 2024–2025 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, and your parents, if a dependent student, reported on your FAFSA. To verify that you provided correct information the financial aid administrator 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. You, and at least one parent if you are a dependent student, must complete and sign this worksheet, attach any required documents, and submit the form and required documents to the Office of Financial Aid. We may ask for additional information. If you have questions about verification, contact the Office of Financial Aid as soon as possible so that your financial aid will not be delayed.

STUDENT'S INFORMATION

Student's Last Name *Student's First Name* *Student's M.I.*

Student's 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 Cell Phone Number

IDENTITY & STATEMENT OF EDUCATIONAL PURPOSE (To Be Signed at the Institution)

1. The student **must appear in person** at Western New England University to verify their identity by presenting an **unexpired** valid government-issued photo identification (ID), such as, but not limited to:

- driver's license
- other state-issued ID
- passport

2. In addition, the student must sign, **in the presence of the institutional official**, the Statement of Educational Purpose below.

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.

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 Western New England University for 2024-2025.

Student's Signature

Student's ID Number

Date

If the student is **unable to appear in person at Western New England University** to verify their identity, **the student may have a notary outside of the university verify his or her identity**. They must provide one of the forms of identification listed above in person to the notary and provide a copy of this identification to Western New England University along with the above Statement of Educational Purpose signed and notarized below.

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)

because 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)

CERTIFICATION AND SIGNATURES

Each person signing this worksheet certifies that all the information reported is complete and correct. If student is dependent, the parent whose information was reported on the FAFSA must sign and date.

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

Student's Signature

Date

Parent's Signature (required if student is dependent)

Date

Spouse's Signature (optional if student is independent)

Date

Return to: Western New England University
Office of Financial Aid, 1215 Wilbraham Road, Springfield MA 01119-2684
Fax: 413-796-2081 Tel: 413-796-2080
finaid@wne.edu
www1.wne.edu/enrollment-services