

Your FAFSA application was selected for review by the Department of Education in a process called Verification. Complete this worksheet and submit to the Financial Aid Office.

**If the information on this form conflicts with the information on the FAFSA and/or is completed incorrectly then additional documentation will be requested. You MUST include your (student's) name and GCU ID number on all documents submitted. Failure to do so will result in a delay of the processing of your documents.**

**\*\*Allow two to three weeks for processing. Please note the processing time of verification may be longer during peak periods.\*\***

Student name \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Alt. ID \_\_\_\_\_

**HOUSEHOLD and COLLEGE INFORMATION**

List the people in your parents' household, including:

- Yourself (even if you don't live with your parents), **and**
- Your parent(s) (including step-parent, if applicable) listed on the FAFSA. **Do NOT include a parent not living in the home due to divorce/separation.**
- Your parents' other children, even if they don't live with your parent(s), **if** (a) your parents will provide more than half of their support\*, or (b) the children would be required to provide parental information when applying for Federal Student Aid.
- Other people if they live with your parents and your parents provide more than half of their support\* and will continue to provide more than half of their support from July 1, 2026, through June 30, 2027.
- Do **not** include foster children in this section.

For any household member who will be attending college at least halftime in a degree, diploma or certificate program at an eligible postsecondary education institution between July 1, 2026, and June 30, 2027, include the name of the college. For students who are undecided you may list any schools they are currently considering. **If your parent(s) are attending college please do not include the name of their university/college in table below.**

<b>Household Information: Please list all members of your parent(s) household</b>			
<b>Full Legal Name of Household Member</b>	<b>Age</b>	<b>Relationship to Student</b>	<b>College (If applicable) No abbreviations or undecided</b>
		Self/Student	Georgian Court University

**\*Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc.**

If additional space is needed, please attach a separate page that includes the student's name and ID number at the top.

**If the number in household and/or college has changed since completing the FAFSA, then please provide an explanation of the change along with this form. Failure to provide clarification (with this form) of any change will require additional documentation.**

**CERTIFICATION AND SIGNATURES**

By signing this worksheet, we certify that all information reported is complete and accurate. *I/we understand that I/we may be required to provide additional documentation if information on this form conflicts with the FAFSA and/or other submitted documentation.*

\_\_\_\_\_  
Student signature

\_\_\_\_\_  
Student printed name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Parent printed name

\_\_\_\_\_  
Date

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

Your FAFSA application was selected for Verification by the Department of Education. Please complete this form to verify your identity and educational purpose. Submit it along with the other required documentation listed below to the Office of Financial Aid to avoid delaying in the processing and awarding of your financial aid.

**If the information on this form conflicts with the information on the FAFSA and/or is completed incorrectly, then additional documentation will be requested. Allow two to three weeks for processing. Please note the processing time of verification may be longer during peak periods.**

Student name \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Alt. ID \_\_\_\_\_

Your FAFSA has been selected for review of your identity and educational purpose. Per federal regulation, you are required to appear in person at the Financial Aid Office located in the Mercy Center at Georgian Court University and present the following:

- A valid, government-issued photo identification (ID) except for any form of military ID ; **and**
- a signed Statement of Educational Purpose (see below)

**or** if unable to appear in person, you must provide the Financial Aid Office with the following:

- a copy of the valid, government-issued photo identification (ID) presented to the notary (except for any form of military ID); **and**
- the original, signed and notarized Statement of Educational Purpose (see below). **\*\*Faxed copies not accepted.\*\***

## Statement of Educational Purpose

I certify that I, \_\_\_\_\_, am the individual signing this Statement of Educational Purpose and that the  
(Print student name)  
federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Georgian Court University for 2026-2027.

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

\_\_\_\_\_  
Student signature Date

### Notary Information (required only if not appearing in person)

State of \_\_\_\_\_ city/county of \_\_\_\_\_ on \_\_\_\_\_, before me,  
(Date)  
\_\_\_\_\_, personally appeared \_\_\_\_\_, and proved to me on basis of satisfactory  
(Notary's name) (Printed name of signer)  
evidence of identification \_\_\_\_\_ to be the above-named person who signed  
(Form of valid government-issued photo ID provided)  
the foregoing instrument.

**WITNESS my hand and official seal** \_\_\_\_\_  
(seal) (Notary signature)  
My commission expires on \_\_\_\_\_  
(Date)

### For the Financial Aid Office use only.

\_\_\_\_\_  
FA staff signature Date

**\*\*Note:** Remember to make a copy of the student's valid government ID which you must sign and date.\*\*