Independent V5 Verification Worksheet 2023-2024

GEORGIAN COURT UNIVERSITY

Student signature

Your FAFSA application was selected for review by the Department of Education in a process called Verification. Complete this worksheet and submit to the Office of 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. You MUST include your (student's) name and 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 nameLast		Alt. ID			
HOUSEHOLD and COLLEGE INFORMATION					
List the people in your household, inc Yourself and your spouse (if app Your children, if you will provid Other family members, if they lithan half of their support from Ju Do not include foster children in For any household member who will be a postsecondary education institution between the secondary education institution education in the secondary education institution education in the secondary education institution education in the secondary education education in the secondary education in the secondary education education education education education education education educa	e more than hale we with you and a this section. ttending college en July 1, 2023	I you provide more than half ough June 30, 2024. e at least halftime in a degree	f of their support* and v	will continue to provide more e program at an eligible	
Household	Information	n: Please list all membe	ers of your househo	old	
Full Legal Name of Household Member	Age	Relationship to Student Self/Student	No abbre	ge (If applicable) viations or undecided n Court University	
*Support includes money, gifts, lost additional space is needed, please attack of the number in household has change with this form. Failure to provide clarify CERTIFICATION AND SIGNATURE By signing this worksheet, I certify that and ditional documentation if information of	h a separate pagd since comple fication (with the SS)	ge that includes the student's ting the FAFSA, then please this form) of any change with the ported is complete and accurate.	s name and SSN/ID nurse provide an explana all require additional curate. I understand that	mber at the top. ation of the change along documentation. I may be required to provide	
Student signature	Student	printed name	Date	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail or both.	

Date

Student printed name

GEORGIAN COURT UNIVERSITY

THE MERCY UNIVERSITY OF NEW JERSEY

FA staff signature

Statement of Identity and Educational Purpose

sign and date.**

2023-2024

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		Alt. ID	
Last	First		
Your FAFSA has been selected for review of y person at the Financial Aid Office located in the			
 A valid, government-issued photo ide a signed Statement of Educational Pu 	entification (ID) except for any form of milit rpose (see below)	tary ID; and	
or if unable to appear in person, you must prov	vide the Financial Aid Office with the follow	ving:	
	ed photo identification (ID) presented to the tement of Educational Purpose (see below).	notary (except for any form of military ID); <u>and</u> **Faxed copies not accepted.**	
	Statement of Educational Purpo	se	
I certify that I,(Print student name federal student financial assistance I may recei	,	s Statement of Educational Purpose and that the es and to pay the cost of attending Georgian	
Court University for 2023-2024.		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 In	formation (required only if not appearing	g in person)	
State ofcity/cou	nty ofon	, before me,	
.,		(Date)	
(Notary's name), personally	(Printed name of signer)	, and proved to me on basis of satisfactory	
evidence of identification_		to be the above-named person who signed	
	government-issued photo ID provided)	co co uno uco vo muneco possessi vino signico	
WITNESS my hand and official seal			
(seal)	(Notary signature)		
	My commission ex	xpires on(Date)	
For	the Financial Aid Office use only.	**Note: Remember to make a copy of the student's valid government ID which you must	

Date