Office of Financial Aid
2014 – 2015 Verification Worksheet
Federal Student Aid Programs

Your 2014–2015 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 (Department of Education) may ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information, financial aid administrators at Bowie State University 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. Warning: if you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

A. Student’s Information

__________________________________________________________________________________________
Student’s Last Name           Student’s First Name          Student’s M.I.                                  Student’s Social Security 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

IF you are a DEPENDENT student, provide the information below about your parent(s) household.  
IF you are an INDEPENDENT student, provide the information below about you and/or your spouse’s household.

B. Information to Be Verified

1. Do you or someone in your household receive benefits from the Supplemental Nutrition Assistance Program or SNAP formerly known as food stamps during 2012 or 2013?  
  ☐ Yes ☐ No  * If yes, please provide documentation for SNAP benefits received during 2012 and/ or 2013.

2. Complete this section if you, (and, if married, my spouse’s) and /or your parent (s) paid child support in 2013

<table>
<thead>
<tr>
<th>Name of Person Who Paid Child Support</th>
<th>Name of Person to Whom Child Support was Paid</th>
<th>Name of Child for Whom Support was Paid</th>
<th>Amount of Child Support Paid in 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marty Jones(example)</td>
<td>Chris Smith</td>
<td>Terry Jones</td>
<td>$6,000.00</td>
</tr>
</tbody>
</table>

C. Certification and Signature

I certify that all of the information reported on this worksheet is complete and correct. The student must sign this worksheet. If married, the spouse’s signature is optional.

Student’s Signature: ________________________________________________ Date: ______________________

Parent’s Signature: ________________________________________________ Date: ______________________

(Independent Students Only)
D. High School Completion Status

Provide one of the following documents that indicate the student’s high school completion status when the student will begin college in 2013–2014:

- A copy of the student’s high school diploma.
- A copy of the student’s final official high school transcript that shows the date when the diploma was awarded.
- A copy of the student’s General Educational Development (GED) certificate or GED transcript.
- 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.
- If State law requires a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.
- If State law does not require a homeschooled student to obtain a secondary school completion credential for homeschool (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 documents the successful completion of a secondary school education in a homeschool setting.

*If the student is unable to obtain the documentation listed above, he or she must contact the financial aid office.

E. Identity and Statement of Educational Purpose (To be Signed at the Institution)

**Complete this section only in the presence of a BSU, Office of Financial Aid Employee OR a Notary Public.

The student must appear in person at Bowie State University or before a Notary Public to verify his or her identity by presenting 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 with the date it was received and the name of the official at the institution authorized to collect the student’s ID.

In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I, _____________________________ am the individual signing this (Print Student’s Name)
Statement of Educational 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 Bowie State University for 2014–2015.

(Student’s Signature) (Student’s ID Number) (Date)

(FAO Administrator’s Signature) (Date)

This original document and a copy of your valid photo ID must be returned to the Office of Financial Aid.

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Notary’s Certificate of Acknowledgement
(if applicable)

State of ___________________________________________ City/County of _______________

On________________________, before me, ________________________________________________,
(Date) (Notary)
personally appeared, ________________________________________, has presented a valid
(Signer/student) government-issued photo identification (ID) such as, but limited to a driver’s license, other state issued ID, or passport.

(Sign) ______________________________________ My commission expires on _________
(notary signature) (date)