

Office of Financial Aid

E finaid@findlay.edu P 419-434-4791

2024-2025 Verification Statement of Educational Purpose Off Campus Student

Your 2024-2025 Free Application for Federal Student Aid (FAFSA) was selected for verification. Federal law requires that a student provide documentation to a financial aid administrator to confirm the information reported on the FAFSA prior to aid being disbursed. The Office of Financial Aid will compare your FAFSA with the information on this worksheet and other required documents. If there are differences, your FAFSA information will be updated. You must complete and sign this worksheet, attach any required documents, and submit these forms to The Office of Financial Aid. If you have questions about this process, contact your financial aid counselor.

. Student's Informatio	n		
tudent's Last Name	Student's First Name	Student's M.I.	Student's Social Security Number
tudent's Email Address			Student's Date of Birth
3. Identify Verification			
copy of the unexpired values or sented to a notary, su	id government-issued pho	oto identification (ID) that is a driver's license, other state-	y his or her identity, the student must provide UF with a acknowledged in the notary statement below or that is rissued ID, or passport; and the original Statement of Ed
	:	Statement of Educational P	Purpose
ttending the University	of Findlay for 2024-2025	stance I may receive will only	be used for educational purposes and to pay the cost o
(Student's Signa	ture)	(Date)	
	Not	ary's Certificate of Acknow	rledgement
State of	State of City/Co		ounty of
On	, before me, _	(Notan's name)	
(Da	ite)	(Notary 3 Harrie)	
personally appea			_, and provided to me on basis of satisfactory
	·	name of signer)	
evidence of iden			to be the above-named person who
signed the foreg	(Type of unexpired oing instrument.	d government-issued photo I	ID provided)
WITNESS my ha	and and official seal al)	(Notary signature)	
		My commission expires o	on
		,	Date