

## 2019-2020 Verification Worksheet Federal Student Aid Programs College of Micronesia-FSM

INDEPENDENT
STUDENT
Tracking Group

V4

Your 2019–2020 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called <u>verification</u>. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information we 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 must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the COM-FSM Financial Aid Office. If you have questions about verification, contact the nearest COM-FSM Financial Aid Office as soon as possible so that your financial aid will not be delayed.

A. Independent Student's Informat	ion				
Student's Last Name	Student's First Name	Student' M.I	Student's SS/ID Number		
Student's Mailing Address (P.O Box City	, State, Zip Code)		Student's Date	e of Birth Hor	ne Phone
<b>B. Supplemental Nutrition Assistanc</b> Check the box that applies:	ce Program				
No one listed in the household re	eceived SNAP benefits in 2017.				
One of the persons listed in hous	ehold received SNAP benefits in 2	2017.			
C. Child Support Paid Check the box that applies:					
No child support was paid for ind	ividuals outside of the household	in one listed in the	household in 201	17.	
The student and/or spouse, who of the persons who paid the chi children for whom child support child support paid for children inc	ild support, the names of the pewas paid, and the total annual an	ersons to whom th mount of child supp	e child support v	vas paid, the names a	and ages of the
If you need more space, attach a separat	e page that includes the student's	s name and Social S	ecurity Number a	<u> </u>	
Name of Person Who Paid	Name of Person to Whom		ild for Whom	Age of Child for Whom	Amount of

**Note:** If we have reason to believe that the information regarding child support paid is inaccurate, we may require additional documentation, such as:

A signed statement from the individual receiving the child support certifying the amount of child support received; or

Chris Smith (example)

Copies of the child support payment checks, money order receipts, or similar records of electronic payment having been made.

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\$6,000

**Marty Jones** 

Terry Jones

Student Name:		SS/ID Number:				
D. High School Completion . Provide one of the following		h school completion status when beginning co	llege in 2019-2020.			
Check the box of the documer	nt you will attach to this worksheet					
A copy of your high	school diploma					
A copy of your final	official high school transcript that sho	ws the date when your diploma was awarded				
	or transcript received by you after pation) that the State recognizes as the e	assing a State-authorized examination (GED equivalent of a high school diploma.	test, HSET, TASC, or other State-			
For students who c similar document.	ompleted secondary education in a	n in a foreign country, a copy of the "secondary school leaving certificate" or other				
An academic transcr bachelor's degree.	ript that indicates your successful com	ppletion of at least a two-year program that is	acceptable for full credit toward a			
	d student in a state where state law than a high school diploma or its equiv	requires the student to obtain a secondary valent), a copy of that credential.	school completion credential for			
for homeschool (ot guardian, that lists	ther than a high school diploma or	loes not require the student to obtain a secon its equivalent), a transcript or equivalent, si student completed and included a statemed setting.	gned by the student's parent or			
A student who is unable to ob	tain the documentation listed above r	must contact the nearest COM-FSM Financial A	Aid Office.			
E. Identity and Statement Section E is ONLY to be cor	· ·	M Financial Aid Office or front of a Notar	у			
The student must appear in pe	erson at					
	(Nan	ne of Postsecondary Education Institution)	_			
state-issued ID, or passport. C date it was received and revi Statement of Education Purpo	COM-FSM Financial Aid Office will main dewed by Financial Aid. In addition, th ose provided below. <b>If you cannot ap</b>	ed photo identification (ID), such as, but not lintain a copy of the student's photo ID that is an estudent must sign, in the presence of a Coppear in person to sign this Statement of Educational Purpose notarized by a public not present the statement of Educational Purpose notarized by a public notarized b	annotated by the College with the DM-FSM Financial Aid official, the cation Purpose, you will need to			
	Statement	of Education Purpose				
I certify that IPrinted	d Student's Name	m the individual signing this Statement of Edu	cational Purpose and that the			
Federal student financial assis	tance I may receive will only be used f	for educational purposes and to pay the cost o	fattending			
			for 2019-2020			
(Name of Postsecondary Ed	ducation institution)					
Student's Signature	 Date	Financial Aid Official's Signature	 Date			

Student Name:		SS/ID Number:		
	Notary's Certificate of Knowledge			
State of	City/Country of	On		
before me,(Notary Signature)	personally appeared,	(printed name of signer)		
and proved to me on basis of satisfact	ory evidence of identification	(Type of government-issued photo ID provided)		
To be the above named person who si	gned the foregoing instrument			
WITNESS my hand and official seal _	(Notary Signature)	(Date Commission	Expires)	
		(Seal)		
F. Certification and Signatures				
		rted on it is complete and correct. WARNING: If you pattenced to jail, or both. The student must sign and c		
Student's Signature		Date		
		Date		
Spouse's Signature (optional)		Date		