

Office of Student Financial Planning,

K-Dub Hub, Pioneer Hall 285, 100 E. Claflin, Salina, KS 67401

Telephone: (785) 833-4315 **FAX**: (785) 404-1485

2022-23 Institutional VerificationWorksheet - V4 Dependent

(Contact: V4_Group)

		(Comaci.	v4_Group)	
			Education for a process called verification. The S. Department of Education's rules 34 CFR, Pa	
We must collect this info	mation before awarding	federal Financial Aid	l. No further processing will be done until all docun	nentation is provided.
SECTION A: STUDEN INFO	<u>ORMATION</u>			
Student Last Name	First	Middle	KWU Student ID # or Social Security Number	er Date
Student Email address			Student Cell Phone number	
			d your 2020 tax information for parents &	student)
	I DID graduate from High School and have a high school diploma.		Office Use Only: HS Transcript Ok: Yes or No	
I DID receive a GED. I DID graduate from a home school program.		IF NO: □ HS Transcript Requested from HS		
		- □ Dt □ Aid Placed on Hold □ HS Transcript received Dt		
I DID NOT receive a hig the above sources.	h school diploma or its equ	ivalent from any of	☐ HS Transcript Ok: Yes or No	
for documentation appropri Financial Planning will email	ate to satisfy this fede you at your KWU em	eral requirement ail account. If yo	eived a GED, your application and admission. If additional documents are needed, the pure were admitted with 24 or more semested of Student Financial Planning.	Office of Student
SECTION C: SIGNATURES	(We need your 2020 t	ax information f	or parents & student)	
			tion reported to qualify for federal	student aid is
complete and correct. <i>F</i>	it least one paren	t included on	the 22-23 FAFSA must sign.	
Student Signature		Date	Parent Signature	Date

Parent Contact Information:				
The Office of Student Financial Planning will use this information to contact the parent to quickly resolve questions to prevent delays in				
processing your awards.				
Parent Name:				
Parent Email Address:				
Parent Cell Phone: ()				

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SECTION D: IDENTITY/ STATEMENT OF EDUCATIONAL PURPOSE

(To be completed in front of a Student Financial Planning Representative or Notary Public)

INSTRUCTIONS FOR SUBMISSION OF THIS FORM: (Please read carefully.)

- **Option 1:** Present this form IN PERSON to the Kansas Wesleyan University Office of Student Financial Planning along with an unexpired valid, government-issued photo identification (i.e. driver's license, state-issued photo identification, military identification, or passport). If you present this form in person to the KWU Office of Student Financial Planning, we will maintain a copy of your government photo identification and date received and name of official who collected it.
- **Option 2:** If you are unable to present this form in person to KWU Office of Student Financial Planning, you MUST SIGN BELOW IN THE PRESENCE OF A NOTARY PUBLIC to have this form notarized. Notary publics can typically be found at banking institutions and government offices such as your local County Clerk.

IMPORTANT: Please read and sign the Statement of Educational Purpose below indicating that the statement and all other information contained on this worksheet is true and correct. WARNING! If you purposely give false or misleading information to help establish eligibility for federal student aid, you may be subject to a federal fine of up to \$20,000, a prison sentence, or both. By signing this statement, you certify that all the information reported in and for this student's application for financial aid is complete and accurate.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I am the individual signing this Statement (Print Student's Name) 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 Kansas Wesleyan University for 2022-23. NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT (for those unable to appear in person in the KWU Student Financial Planning Office) _____, City/County of __ State of On this date of ______, before me (notary's name), _____ personally appeared (name of person signing this form) and proved to me on basis of satisfactory evidence of identification (type of government-issued photo ID provided) to be the above-named person who signed the foregoing instrument. WITNESS my hand and official seal: My commission expires on: Notary Public's Signature Date KWU SFA ONLY: Government ID accepted by Date: Attach photocopy of student's government Issued ID. O Entered on FAA Access-On-Line on Date Attach FAA Access On Line print-out.

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