

Toll Free (800)561-2606

2015-2016 Dependent Verification Group V4 Worksheet

Your 2015-2016 Free Application for Federal Student Aid (FAFSA) has been selected for review in a process called Verification.

Student Information

Last Name	First Name		Student ID #	
Address			Date of Birth	
City	State	Zip	Phone Number	

Please complete the following: For all purpose below, the parent(s) household includes:

- 1. the student;
- 2. the parent(s) (including a stepparent) even if the student doesn't live with the parents;
- 3. the parents' other children if the parents will provide more than half of the children's support from July 1, 2015, through June 30, 2016, or if the other children would be required to provide parental information if they were completing a FAFSA for 2015-2016. Include children who meet either of these standards even if the children do not live with the parents.; and
- 4. other people if they now live with the parents and the parents provide more than half of the other people's support and will continue to provide more than half of their support through June 30, 2016.

A. Receipt of SNAP Benefits: The student's parent(s) certify that _

a member of the parents' household, received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2013 or 2014. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243). **Note:** If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2013 or 2014.

B. Child Support Paid: One of the parents included in the household paid child support in 2014. List below the names of the persons who paid the child support, the names of the persons to whom the child support was paid, the names of the children for whom the child support was paid, and the total annual amount of child support that was paid in 2014 for each child.

Name of Person Who Paid Child Support	Name of Person To Whom Child Support Was Paid	Name Of Child Whom Support Was Paid	Amount Of Child Support Paid In 2014

Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation, such as:

• A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;

- A statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks or money order receipts.



[®] C. Identity/Statement of Educational Purpose

The form must be completed and signed in the presence of either a Lincoln University Financial Aid Administrator or a Notary Public. Do <u>not</u> complete this section in advance.

First Name

Name of Student: _

Last Name

M.I.

Student ID#:

The student must appear in person at The Lincoln University, Office of Financial Aid 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 Statement of Educational (Print Student's Name) 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 The Lincoln University for 2015-2016.

Student's Signature	Date	Student's ID Number	
If Submitting in Person: Present this form with original valid government-i	ssued photo ID	If Submitting by Mail: Send this form with photocopy of valid government-issued photo ID	
To be completed by The Lincoln University I Administrator.		To be completed in the presence of a Notary Public.	
ID Type:		State of:	
ID Number:	Exp. Date:	City/County of:	
FAA Name:		This instrument was acknowledged before me on:	
FAA Title:		By:	
FAA Signature:	Date:	Signed: (Seal)	

Notary must list the type of government ID used to document identity:_____

D: High School Completion Status

Provide <u>one</u> of the following documents that indicate the student's high school completion status when the student will begin college in 2015-2016. **Please circle the statement that applies to you.**

- A copy of the student's high school diploma is attached.
- A copy of the student's final official high school transcript that shows the date when the diploma was awarded is attached.
- A copy of the student's General Educational Development (GED) certificate, an official GED transcript that indicates the student passed the exam, or a state-authorized high school equivalent certificate is attached.
- For students who completed secondary education in a foreign country, a copy of the "secondary school leaving certificate" or other similar document is attached.
- An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit towards a bachelor's degree is attached.
- For a homeschooled student from a state where state law requires the 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 includes a statement that the student successfully completed a secondary school education in a homeschool setting is attached.

****A student who is unable to obtain the documentation listed above must contact the Financial Aid Office.****

E. Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one person whose information was reported on the FAFSA must sign and date.

Print Student's Name

Date

Student's ID Number

Parent's Signature

Date

Please return this worksheet, along with the required documentation to:

The Lincoln University Office of Financial Aid 1570 Baltimore Pike Lincoln University, PA 19352

If you have any questions, please feel free to contact the Financial Aid Office at (800)-561-2606. Our office hours are 8:30 a.m. to 5:00 p.m., Monday through Friday.