

## 2022-2023 Verification Worksheet Independent V4

(505) 454-2560 • (800) 588-7232 ext. 1036 FAX: (505) 454-2539 • EMAIL: finaid@luna.edu

Please read the entire form, complete ALL sections, attach the requested documentation, sign the form, and return to the Financial Aid Office. By law, Luna Community College has the right to request this information before awarding financial aid. *Incomplete worksheets and documentation will cause delays in processing your financial aid. No determination of aid eligibility can be made until all documents are received and reviewed.* Warning: If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.

	ts are received and reviewed. Warned, be sentenced to jail, or both.	• , , , , ,	false or misleading information on this form, you	
A. Stude	ent's Information			
Print Studer	nt's Name		LCC ID #	
Student's LCC Email Address			Student's Phone Number (Include area code)	
B. Ident	ity and statement of Educ	cational Purpose		
Check t	he box that applies:			
	issued photo identification (ID), such institution will maintain a copy of the received and reviewed, and the national (Complete Section 1).  I am unable to appear in person at	ch as, but not limited to, a driv he student's photo ID that is a me of the official at the institu	dentity by presenting an unexpired valid government- ver's license, other state-issued ID, or passport. The annotated by the institution with the date it was ation authorized to receive and review the student's ID. verify my identity. (Complete Section 2)	
		Statement of Educa (To be signed at Luna Co		
	I certify that I(Print Studen	am the individ	dual signing this Statement of Educational Purpose	
	and that the Federal student fi pay the cost of attending <u>Luna</u>	•	ve will only be used for educational purposes and to -2023.	
	(Student's Signature)	(Date)		
			Financial Aid Office Use:	
			Initial: Date: ID used:	

Student Name:		LCC ID #:				
	2.	If unable to appear in person at Luna Community College to verify his/her identity, the student must provide:				
		(a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, oth state-issued ID, or passport; and				
	(b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.					
	Identity and Statement of Educational Purpose  (To Be Signed in the Presence of a Notary)					
	I certify that I am the individual signing this <i>Statement of Educational Purpose</i> (Print Student's Name)  and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending <u>Luna Community College</u> for 2022-2023.					
	(Stu	udent's Signature) (Date)				
	(LCC	C ID Number)				
	Notary's Certificate of Acknowledgement					
	Sta	ate ofCity/County of				
	On	(Date) , before me,, personally appeared, (Notary's name)				

On	, before me,		, personally appea
(Date)		(Notary's name)	. , , , ,
		, and provided to m	ne on basis of satisfactory
(Printed name of sign	er)		
evidence of identification			to be the above-named p
	(Type of unexpired governr	ment-issued photo ID provided)	
who signed the foregoing	instrument.		
WITNESS my hand and of	ficial seal		
(seal)			
, ,	_	(Notary signat	ure)
My commission expires or	1		
,	(Date)		

person

Certifications and Signatures	
The person signing below certifies that all of the information reported is complete and correct.	WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.
Print Student's Name	LCC ID #
Student's Signature Required	 Date

Student Name: \_\_\_\_\_

LCC ID #: \_\_\_\_\_