



Verification Worksheet – Dependent – 2025-2026

V4

Your FAFSA application was randomly selected by the federal processor for a process called "verification." The law states that before awarding Federal Student Aid we may ask you to confirm the information you and your parents reported on your FAFSA. The Financial Aid Office will compare information from your FAFSA with your and your parent's financial documents. Peninsula College may be required to correct your FAFSA if there are differences between your FAFSA and the documents you submit for verification.

Required Steps and Instructions:

1. Complete all sections of this worksheet, including signatures, in blue or black ink. (We cannot accept pencil.) You and your parent **MUST** sign this worksheet. **Electronic signatures are not permitted.**
2. Submit this worksheet and other required documents to the Financial Aid Office via regular mail (if using a notary) or in person (if not using a notary.) **Please do not send this completed form via email; the original signed form is required by the Financial Aid Office.** Do not submit this worksheet to the U.S. Dept. of Education.
3. **Incomplete worksheets will not be accepted. These documents are required to complete your financial aid file and must be submitted prior to the quarterly deadline in order to be processed before the start of the quarter.**

Student Information:

Last Name	First Name	MI	SSN	ID Number
Email Address			Date of Birth	Phone Number

Supplemental Nutrition Assistance Program (SNAP):

Did you, your parent, or anyone in your household receive benefits from the Supplemental Nutrition Assistance Program (SNAP), formerly known as food stamps, at any time during the 2023 or 2024 calendar years? Yes ☐ No ☐



Identity and Statement of Educational Purpose - (ONLY COMPLETE SECTION A or B, NOT BOTH!)

Section A - TO BE SIGNED AT THE SCHOOL (IN PERSON)

- ☐ I am appearing in person at Peninsula College to verify my identity by presenting an unexpired **valid government-issued photo ID** (such as driver's license, other state-issued ID, or passport). A Financial Aid or Student Services staff member will **photocopy** and maintain a copy of my photo ID with an annotation of the **date received** and the **name of the person authorized to receive and review** the student's photo ID.

ONLY COMPLETE SECTION A IF APPEARING IN PERSON. IF YOU ARE COMPLETING SECTION A, DO NOT COMPLETE SECTION B.

In addition, I must sign the following in the presence of a Financial Aid or Student Services staff person:

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement 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 Peninsula College for 2025-2026.

Student's Signature _____ Date _____ FA or SS Staff Signature _____

Section B - TO BE SIGNED WITH NOTARY (ONLINE NOTARIES ARE NOT ACCEPTED)

- ☐ I am unable to appear in person at Peninsula College to verify my identity, therefore I am providing:
- (a) A copy of the **valid government-issued photo identification** (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport,
AND
 - (b) The original notarized and signed Statement of Educational Purpose provided below.

ONLY COMPLETE SECTION B IF YOU CANNOT APPEAR AT THE SCHOOL IN PERSON. IF YOU ARE COMPLETING SECTION B, DO NOT ALSO COMPLETE SECTION A.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement 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 Peninsula College for 2025-2026.

Student's Signature _____ Date _____

Notary's Certificate of Acknowledgement

State of _____ City/County of _____ On _____, before me, _____, personally appeared, _____, and proved to me because of satisfactory evidence of identification _____ to be the above-named person who signed the foregoing instrument.

(Notary's name)

(Printed name of signer)

(Type of government-issued photo ID provided)

WITNESS my hand and official seal

(seal)

(Notary signature)

My commission expires on _____

(Date)

Required Signatures:

I affirm that the information provided in this worksheet and my other financial aid documents is true and correct to the best of my knowledge. I confirm that I have reviewed, understand and agree to the conditions, responsibilities and obligations in order to receive financial aid for the 2025-2026 academic year as stated in the Conditions of Award and Satisfactory Academic Progress Policy, available on the Financial Aid website (www.pencol.edu/financial).

Student Name _____ Signature _____ Date _____

Parent Name _____ Signature _____ Date _____