

Student Verification- Custom (V4) 2025-2026

Your 2025–2026 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. 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 institutional verification document and with any other required documents. If there are differences, your FAFSA information may need correcting. You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may request additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

| Student Name: | Student ID#: | | | | | |
|---------------|--------------|--------|-------|----------|-------------|--|
| | Last | | First | MI | | |
| Home Address: | | Phone: | | | | |
| | Street | City | State | ZIP Code | Home Number | |

Identity and Statement of Educational Purpose (to be signed at institution)

Complete this section only if you are bringing this for to campus

The student must appear in person at Ozarka College to verify his or her identity by presenting an unexpired 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 by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below

| • • | | | | | | |
|---|-----------------------------|------------------|--|--|--|--|
| Statement of Educational Purpose | | | | | | |
| I certify that I(Print Student's Name) | am the individual signing t | his 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 Ozarka College for 2025-2026. | | | | | | |
| | | | | | | |
| | | | | | | |
| (Student's Signature) | (Student's ID Number) | (Date) | | | | |

| Ozarka Financial Aid Office Use Only: I verify that this student, is the said student, which has signed and dated the above document. | | | | |
|---|-----------------|--|--|--|
| (Signature/Title) | (Date Received) | | | |

Identity and Statement of Educational Purpose (<u>to be signed in the Presence of a Notary</u>) *Complete this section only if you are mailing in this form*

If the student is unable to appear in person at Ozarka College to verify his or her identity, the student must provide to the institution:

- 1. 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, other state-issued ID, or passport; and
- 2. 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.

| Statement of Educational Purpose | | | | | |
|--|---------------------------|--|----------------------|--|--|
| I certify that I | | | | | |
| I certify that I am the individual signing this Statement of (Print Student's Name) 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 Ozarka College for 2025-2026. | | | | | |
| (Student's Signature) | | (Student's ID Number) | (Date) | | |
| Notary's Certificate of Acknowledgement | | | | | |
| State of | City/County of | On | <u> </u> | | |
| Before me, | | , persona | (Date) Ily appeared, | | |
| | (Notary's name) | | | | |
| , and provided to me on the basis of (Printed name of signer) | | | | | |
| satisfactory evidence of identific | ation | | to be the | | |
| - | (Type of unex | pired government-issued photo ID provide | ed) | | |
| above-named person who signe | ed the foregoing instrume | ent. WITNESS my hand and | d official seal | | |
| | | (Seal) | | | |
| | | | | | |
| My commission expires on | | | | | |
| my commission explice on | (Date) | (Notary Signatur | re) | | |