



Your FAFSA application was selected for review by the US Department of Education in a process called Verification. The Financial Aid Office must compare information from your FAFSA with information you provide on this worksheet and with any other required documents. If there are differences, the Financial Aid Office could require additional documentation and your FAFSA information may need to be corrected.

Complete this verification form and submit it to your financial aid administrator within 60 days of notification. The Office of Financial Aid cannot fully process your financial aid without this information.

Student Information

_____	_____	_____	_____	_____
Last Name	First Name	MI	Phone Number	SSN
_____			_____	_____
Street Address			City	State Zip
_____	_____	_____		
Date of Birth	Student ID #	Email Address		

Dependent Student*

*A student is considered dependent if the student was required to provide parental information on the FAFSA.

Independent Student**

OR

**A student is considered independent if the student was required to provide parental information on the FAFSA.

Sign the Worksheet

I/We affirm that the information provided in this application and supporting documentation (if applicable) is true and correct. I/We understand that any false statements or misrepresentations will be cause for denial, reduction, cancellation, or repayment of financial aid. The student and one parent (if applicable) whose information was reported on the FAFSA must sign and date.

Student Signature: _____ **Date:** _____

Parent Signature (if applicable): _____ **Date:** _____

Continue to next page to complete Statement of Educational Purpose.



STATEMENT OF IDENTITY/ EDUCATIONAL PURPOSE V4

Please read the following section carefully.

Option 1 should be completed if you are able to appear in person at the NNU Financial Aid Office.

Option 2 should be completed if you are NOT ABLE to appear in person. The completion of this option must be witnessed by a notary.

Option 1 – If the student is able to appear in person at NNU:

Identity and Statement of Educational Purpose (if ABLE TO APPEAR in person – to be signed in the presence of INSTITUTION OFFICIAL)

The student must provide:

- a) A copy of the valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport.
b) 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 collect the student's ID.

The student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

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 Northwest Nazarene University for 2024-2025.

Student Signature: _____ Date: _____

Student ID: _____

Name of Institutional Official: _____ Date: _____

..... Stop here if you were able to sign in person



STATEMENT OF IDENTITY/ EDUCATIONAL PURPOSE V4

Option 2 – if the student is unable to appear in person at NNU to verify his or her identity:

Identity and Statement of Educational Purpose (if UNABLE to appear in person – to be signed in the presence of a notary)

The student must provide:

- a) A copy of the 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
b) The original Statement of Educational Purpose, which is provided below, 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.

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 Northwest Nazarene University for 2024-2025.

Student Signature: _____ Date: _____

Student ID: _____

Notary’s Certificate of Acknowledgement
State of _____ City/County of _____ on _____ before me
State City/County Date
_____ personally appeared, _____ and
Notary’s Name Print Student’s Name
provided to me basis of satisfactory evidence of identification _____ to be the
above-named person who signed foregoing instrument.
Type of government-issued photo ID provided
WITNESS my hand and official seal _____
Seal Notary Signature
My commission expires on _____
Date