



2024-2025 Independent Verification Worksheet V4- Independent Student

The U.S. Department of Education selected Your Free Application for Federal Student Aid (FAFSA) application for a process called "Verification". Gallaudet University's Financial Aid Office will compare information reported on your FAFSA with information from this form and other documents provided.

Under the law, Gallaudet University has the right to ask you for this information before awarding federal and state aid. If you do not complete verification, you are not eligible to receive any need-based financial aid.

Instructions:

1. Complete all sections of this worksheet in full.
2. Please return all documents requested using one of the following methods:
 - Drop off: Financial Aid Office in SLCC: Student Services Center
 - Mail to: Gallaudet University Office of Financial Aid
800 Florida Avenue NE
Washington, DC 20002

Section 1: Student's Information

Student Name: (last, first, middle initial):	
Student's Gallaudet ID:	
Student's Date of Birth (mm/dd/yyyy):	
Student's Street Address: (include apt #)	
City, State, Zip Code:	

Section 2: Ink Signature

I certify that all the information reported on this worksheet is complete and correct. I understand that if I purposely give false or misleading information, I could be fined, jailed, or both. Note: If we have some reason to believe the information reported on this form is not accurate, we may require additional documentation. **Electrical signatures are not acceptable.**

Student's Full Name: _____

Signature: _____

Date: _____

Spouse's Full Name (if married): _____

Signature: _____

Date: _____

2024-2025 Identity and Statement of Educational Purpose
(To Be Signed IN PERSON AT THE FINANCIAL AID OFFICE)

You must appear in person at Gallaudet University's Financial Aid Office to verify your identity by presenting a valid government-issued photo identification (ID), such as a driver's license, other state-issued ID, or passport. In addition, you must sign, in the presence of the Financial Aid staff, the following:

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 Gallaudet University for 2024-2025.

(Student's Signature)

(Date)

(Student's ID Number)

Financial Aid Office Use Only:

☐ Student presented in office; Notary not necessary.

Statement Received By: _____ Date: _____

If you are unable to appear in person at the Financial Aid Office, this form must be notarized and mailed with a copy of a government issued ID listed above.

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,
(Date) (Notary's name)

personally appeared, _____, and provided to me
(Printed name of signer)

on basis of satisfactory evidence of identification _____
(Type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(Notary signature)

(Seal)

My commission expires on _____
(Date)