

Office of Financial Aid

1570 Baltimore Pike Lincoln University, PA 19352-0999 **800-561-2606** phone **484-365-8198** fax <u>financialaid@lincoln.edu</u>

2024-2025 Verification Group V4 Worksheet

Your 2024-2025 Free Application for Federal Student Aid (FAFSA) has been selected for review in a process called Verification.

Student Information				
Last Name	First Name		Student ID #	
Address			Date of Birth	
City	State	Zip	Phone Number	
Lincoln Univers	sity Financial <i>A</i> Do <u>not</u> co	Aid Administomplete this	signed in the presence of either a trator or a Notary Public. section in advance. e (To be Signed at the Institution)	
unexpired valid gov license, other state- that is annotated by official at the institu sign, in the presence	vernment-issued phoissued ID, or passpoother institution with attion authorized to e of the institutiona	noto identification ort. The institut In the date it wa receive and rev In official, the Sta	rity to verify his or her identity by presenting an on (ID), such as, but not limited to, a driver's cion will maintain a copy of the student's photo ID as received and reviewed, and the name of the riew the student's ID. In addition, the student must attement of Educational Purpose provided below.	
ID Type:			versity Financial Aid Administrator.	
ID Number:		Exp. Date:		
FAA Name:				
FAA Title:				
FAA Signature:		Date:		

Identity/Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

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

- (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, other 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.

These forms will not be accepted if they are faxed or scanned to the Office of Financial Aid. We HAVE to be in receipt of all these original documents.

Statement of Educational Purpose

I certify that I,(Print Student's Name)	, am the indivi	dual signing this Statement of Educational			
Purpose and that the Federal student financial apurposes and to pay the cost of attending Linco	assistance I ma	ay receive will only be used for educational			
Student's Signature	Date	Student's ID Number			
If Submitting by Mail: Send this form with photocopy of valid government-issued photo ID To be completed in the presence of a Notary Public.					
State of:					
City/County of:					
Date:					
Before me,					
(print Notary's name):					
Personnally Appeared,					
(printed name of signer):					
Proved to me on the basis of satisfactory evidence of identification:					
Signed:	_ My co	ommission expires on:			
(Notary Signature)					
Witness my hand and official seal					

Certifications and Signatures

student and one person whose information was reported	d on the FAFSA must sign and date.
Print Student's Name	Student's ID Number
Student's Signature	Date
Parent's or Student's Spouse (if married) Signature	Date

Each person signing below certifies that all of the information reported is complete and correct. The

Please return this worksheet, along with the required documentation to:

Lincoln University, Office of Financial Aid 1570 Baltimore Pike Lincoln University, PA 19352

If you have any questions, please feel free to contact the Financial Aid Office at (800)-561-2606. Our office hours are 8:30 a.m. to 4:00 p.m., Monday through Friday.