|  |  |
| --- | --- |
| CPTC Logo | **COMPLETE AND RETURN TO:**  4500 Steilacoom Blvd. SW Bldg 17, Room 130  Lakewood, WA 98499-4004; finaid@cptc.edu  **School Code: 015984**  253.589.5660 office 253.589.5618 fax |

# **STUDENT AID & SCHOLARSHIPS**

# **DEPENDENT VERIFICATION WORKSHEET 2023-2024**

# **V4 EDUCATIONAL STATEMENT with NOTARY**

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| --- |
| **You must appear in person** before a Certified Notary of the Public and show them your valid government-issued photo ID **AND** sign the Educational Purpose Statement (section D) in the presence of the Certified Notary of the Public. You must then mail this worksheet, along with the original notary document, to the Student Aid & Scholarships Office.  The Student Aid & Scholarships office cannot process your application without this information. |

**Federal Student Aid Programs** Your application was selected for review in a process called “Verification.” In this process, the Student Aid & Scholarships Office will be comparing information from your FAFSA application with you and your parent(s)’ financial documents. We are required to review your FAFSA information under financial aid program rules (34 CFR, Part 668). The law says we have the right to ask you for this information before awarding Federal aid. If there are differences between your application information and your finan­cial documents, corrections to your FAFSA may be required.

## **A: Student Information**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |
| *Last* |  | *First* |  | *MI* |  | *SSN* |  | *EMPL ID* |
|  |  |  |  | @students.cptc.edu |  |  |  | ( ) |
|  | *Email* |  |  |  |  | *Date of Birth* |  | *phone* |

## **B: High School Completion Status**

Please check only one box and provide required document(s).

* **High School Diploma**. Attached is a copy of my diploma or high school transcript indicating graduation date.
* **GED**. Attached is a copy of my GED certificate.
* **Home School Graduate**. Attached is a transcript signed by my parent or guardian listing the secondary courses completed and documenting the successful completion of secondary school.

## **C: Required Signatures**

|  |  |
| --- | --- |
| I affirm that the information provided in this application and other Student Aid & Scholarships documents is true and correct to the best of my knowledge. I agree that I have reviewed, understand and agree to the conditions, responsibilities and obligations in order to receive financial aid for the 2023-2024 academic year as stated in the Conditions of Award Packet and Satisfactory Academic Progress Policy available on the Financial Aid website. | |
| **Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Parent Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_**  **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_** |

The college provides equal opportunity in education and employment and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, marital status, creed, religion, or status as a veteran of war. Prohibited sex discrimination includes sexual harassment (unwelcome sexual conduct of various types).

## **D: Educational Purpose: Completion of this section MUST BE WITNESSED AND SIGNED BY A NOTARY OF THE PUBLIC.**

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

1. 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 Statement of Educational Purpose provided below.

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am the individual signing this Statement of Educational Purpose and that (Print Student’s Name) the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Clover Park Technical College for 2023-2024.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Student’s Signature) (Date) (Student’s ID Number)

**Notary’s Certificate of Acknowledgement**

State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, before me, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(Date) (Notary’s name)

personally appeared, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and provided to me on basis of satisfactory evidence of (Printed name of signer)

identification \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to be the above-named person who signed the foregoing instrument (Type of government-issued photo ID provided)

**WITNESS my hand and official seal**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ My commission expires on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Notary signature) (Date)

# (seal)