

**STUDENT AID & SCHOLARSHIPS
 DEPENDENT VERIFICATION WORKSHEET 2023-2024
 V4 EDUCATIONAL STATEMENT**

You must appear in person and show a Student Aid & Scholarships staff member your valid government-issued photo ID **AND** sign the Educational Purpose Statement (section D) in the presence of a Student Aid & Scholarships Staff Member. If you are unable to appear in person, you must contact the Student Aid & Scholarships Office for further instructions.

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			Date of Birth	() phone
Email				

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 _____ **Signature** _____ **Date** _____

Parent Name _____ **Signature** _____ **Date** _____

D: Educational Purpose: Completion of this section MUST BE WITNESSED AND SIGNED BY A STUDENT AID & SCHOLARSHIPS STAFF MEMBER.

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 Clover Park Technical College for 2023-2024.

(Student's Signature)

(Date)

(Student's ID Number)

If you are unable to appear in person, you must contact the Student Aid & Scholarships office for further instructions.

(Witnessing Student Aid & Scholarships Staff Member's Signature)

(Date)

**Copy of valid government issued photo identification required. **