



Southeastern Illinois College
 Financial Aid Office
 3575 College Rd.
 Harrisburg, IL 62946
 Phone: (618) 252-5400 Fax: (618) 252-3062
 Email: fao@sic.edu

2016-2017
Custom Verification
Independent

V4

Your application was selected for review in a process called 'Verification'. In this process, the Financial Aid Office will be comparing information from your FAFSA with information provided on this document. *The law authorizes us to ask you for this information before awarding federal aid. If there are differences between your application information and your financial documents, the Financial Aid Office may send corrections electronically to have your information reprocessed. Complete verification as soon as possible so your financial aid will not be delayed.*

Section A- Student Information

_____		_____	
Last Name	First Name	M.I	Student ID Number
_____		_____	
Address		Date of Birth	
_____		_____	
City	State	Zip Code	Phone Number

Section B- Child Support Paid Information

Did you or your spouse pay child support in 2015? YES NO

Did your parent(s) pay child support in 2015? YES NO

Child Support Paid

Name of whom child support was paid	Name of child	2015 Total paid
		\$
		\$
		\$
		\$
		\$

Section C- Food Stamps (Supplemental Nutrition Assistance Program)

Did you or any member of your household receive Supplemental Nutrition Assistance Program or SNAP (Food Stamps) at any time during 2014 or 2015? YES NO

If our office has reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2014 or 2015.

Section D- High School Completion Status

Provide one of the following documents that indicate the student's high school completion status when the student will begin college in 2016-2017. If the student is unable to obtain the documentation listed below, he or she must contact the Financial Aid Office.

- A copy of student's high school diploma.
- A copy of the student's final official high school transcript that shows the date when the diploma was awarded.
- A copy of the student's General Educational Development (GED) certificate or GED transcript.
- An academic transcript that indicates the student successfully completed at least two-year program that is acceptable for full credit toward a bachelor's degree.
- If State law requires a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.
- If State law does not require a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a transcript or the equivalent signed by the student's parent or guardian, that lists the secondary school courses the student completed and documents the successful completion of a secondary school education in a homeschool setting.

Section D- Statement of Educational Purpose

The student must appear in person at Southeastern Illinois College to verify his or her identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student's ID.

If the student is not submitting this paperwork to the Financial Aid Office in person, this section must be completed and signed in the presence of a Notary Public.

In addition, the student must sign, in the presence of the institutional official or Notary Public, 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 Southeastern Illinois College for 2016-2017.

To be completed by Financial Aid Officer is submitting in person:

Financial Aid Officer Name Printed

Financial Aid Officer Title

Financial Aid Officer Signature

Date

To be completed by a Notary Public who is submitting by mail:

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

My commission expires on _____
Date

Seal

Section E – Signatures Required

By signing this worksheet, we certify that all the information reported to qualify for Federal Student Aid is complete and correct.

Student Date

Spouse Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.