

IVFV4

2025-2026 Verification of High School Completion, Identity/ Statement of Educational Purpose

Your Free Application for Federal Student Aid (FAFSA) has been selected for a process called verification. Federal law requires that an institution verify certain information that has been listed within the FAFSA before federal aid can be disbursed.

To complete the verification process, the financial aid office will compare the information listed on your FAFSA to the information listed on this worksheet along with other documents submitted. If there are differences, your FAFSA information will need to be corrected. Please complete this worksheet, sign, and submit to the Office of Financial Assistance and Veteran's Affairs as soon as possible to prevent any delays in the disbursement of your aid.

A. Student Information				
Print: Last Name, First Name, M.I.		CofC	D	
B. Documentation of Idea	ntity/Statement of Ec	lucational Purpose		
government issued ID (such as a drive financial aid administrator. Your finan	er's license, passport, etc.) and	ar in person at your postsecondary instituted to validate the statement below at the nd date below. <i>If you cannot appear</i>	time of submission by	
this worksheet, you will need to p	<mark>rovide a copy of your gover</mark>	nment issued ID and this workshed	<mark>et notarized by a public</mark>	
notary.				
Statement of Educational Pur	pose			
I certify that I		am the individual s	igning this Statement of	
Educational Purpose and that the fede pay the cost of attending the College		e I may receive will only be used for edu	ucational purposes and to	
Student's Signature and Date		Financial Aid Administrator Signature	and Date	
Notary's Certificate of Kr	n <mark>owledge</mark>			
State of	City/County of	on_		
		ared		
print notary's		print name of signer	•	
And provided to me on basis of	f satisfactory evidence of identi		NOT III ID	
To be the above named person	who signed the foregoing instr	government-issued ID. Dorument,	NOT use military ID	
Witness my hand and official s	eal			
	notary signature	date commission expires	seal	

C. Sign This Worksheet

By signing this worksheet, we certify that all the	information reported on this	worksheet is complete and correct.
Student Note: Electronic signatures are NOT acceptable.	Date	Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.
Spouse if applicable Note: Electronic signatures are NOT acceptable.	Date	

Sign and date this worksheet and all required documents. One completed, mail to address below or submit to our office in person. Fax or email are not acceptable.

Office of Financial Assistance and Veteran Affairs 66 George Street Charleston, SC 29424

Rev 2/20/2025