2025–2026 Hollins University Verification Form Independent Student

Your 2025–2026 FAFSA was selected by the U.S. Department of Education for review in a process called *verification*. The law states that we should confirm some of the information you reported on your FAFSA before awarding federal student aid. To verify that you provided correct information, we will compare your FAFSA with the information on this verification worksheet and with any other required documents. If there are differences, your FAFSA may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this verification worksheet, attach any required documents, and submit the form and other documents to us. We may ask for additional information. If you have questions about this process, contact us as soon as possible so that your aid will not be delayed.

A. STUDENT'S INFORMATION

Student's Last Name	First Name	M.I.	Student's Social Security Number
Student's Permanent St	reet Address (include ap	Student's Date of Birth	
City	State	Zip Code	Student's Email Address
Student's Home Phone	Number (include area co	Student's Cell Phone Number	

B. <u>Identity and Statement of Educational Purpose</u>: Complete <u>either</u> section B1 or B2. B1 requires your physical presence at the Hollins University Financial Aid Office. B2 requires an authorized notary to complete this form with you. Verification cannot be completed until section B1 or B2 is completed properly.

B1. Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person at Hollins University to verify his or her identity by presenting an unexpired 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 by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I ______ am the individual signing this Statement of Educational Purpose (Print Student's Name)

and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay

the cost of attending _

for 2025-2026.

(Name of Postsecondary Educational Institution)

(Student's Signature)

(Date)

(Student's ID Number)

B2. Identity and Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at Hollins 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.

Statement of Educational Purpose

I certify that I am the individual signing this Statement of Education			
(Print Student's N	ame)		
and that the Federal student financial	assistance I may receive will only be used for educational purposes and to pay		
the cost of attending	for 2025-2026.		
(Name of	for 2025-2026. Postsecondary Educational Institution)		
(Student's Signature)	(Date)		
(Student's ID Number)			
Notony	a Contificate of Aslandarian		
notary	's Certificate of Acknowledgement		
State of			
City/County of			
On, before me,	,		
(Date)	(Notary's name)		
personally appeared,	, and proved to me because		
(Printed name of sig			
	(Type of unexpired government-issued photo ID provided)		
to be the above-named person who signed the			
to be the above named person who signed the	foregoing instantent.		
WITNESS my hand and official seal			
(seal)			
	(Notary signature)		

My commission expires on _____

(Date)

C. CERTIFICATION AND SIGNATURES

Each person signing below certifies that all of the verification documents submitted with this certification are complete and correct.

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

Print Student's Name

Student's Signature (Required)

Date

Hollins ID Number

Spouse's Signature (Optional)

Date

Submit this worksheet to the Financial Aid Office at Hollins University.