



## V4 Verification Worksheet – Dependent Student

This form must be completed with review of your government issued, unexpired photo ID either in person with a member of Hollins staff or a video call. For other methods of identification review, please contact us at [sfa@hollins.edu](mailto:sfa@hollins.edu).

### **Student Information:**

\_\_\_\_\_  
Student Last Name      First Name      M.I.

\_\_\_\_\_  
Student Last Four SSN

\_\_\_\_\_  
Student Permanent Street Address (include apt. no.)

\_\_\_\_\_  
Student Date of Birth

\_\_\_\_\_  
City      State      Zip Code

\_\_\_\_\_  
Student Email Address

By signing below, you are confirming that the government issued unexpired, photo ID has been issued directly to you and is a valid form of identification. **WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sent to prison, or both.**

\_\_\_\_\_  
Student Signature (Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature (Required)

\_\_\_\_\_  
Date

### **For Financial Aid Office use only:**

ID form used \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Printed Name of Reviewer: \_\_\_\_\_

Signature of Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_