

2024-2025 Verification of Identity and Statement of Education (LSTED-#G3)

Your 2024-2025 Free Application for Federal Student Aid (FAFSA) or California Dream Act Application was selected for review in a process called verification. The law says that before awarding Federal/State Student Aid, we may ask you to confirm the information you and your parents reported on your FAFSA/California Dream Act Application. To verify that you provided correct information we will compare your FAFSA/California Dream Act Application with the information on this worksheet and with any other required documents. If there are differences, your FAFSA or California Dream Act Application information may need to be corrected. You must complete and sign this worksheet in PEN, attach any required documents, and submit the form and other required documents to the financial aid office. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your

Student Information:					
ast Name	First Name	N	1.1.	Student ID (10 dig	gits)
Instructions:	n signed in the presence of a	Notary Public	than si	uhmitted -	
This form can only be completed then signed in the presence of a Notary Public, then submitted the SD Mesa College Financial Aid Office by US Mail with the notary official seal and signature at all necessary documentation including valid verified Photo Identification. Please DO NOT fax, email or submit this form online. US Mailing Address: 7250 Mesa College Drive, Financial Aid Office I4-107, San Diego, CA 92111.				nature and on on one one	VARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be entenced to jail, or both.
A. Identity and Statement of I	Educational Purpose <mark>(T</mark>	o Be Signed	<mark>l wit</mark>	Notary)	
student must provide: (a) A copy	(Name of the valid government-i limited to a driver's licens	of Postsecondar ssued photo i	y Educa dentifi	tional Institution) ication (ID) that	to verify his or her identity, the tis acknowledged in the notary rt; and (b) The original notarized
	Statement	t of Education	al Pur	pose	
certify that I(Print Student'	am the in	idividual signi	ng this	Statement of I	Educational Purpose and that the
ederal student financial assistanc			ucatio	nal purposes ar	nd to pay the cost of attending
Name of Postsecondary Educational Insti	for 2024 :ution)	-2025.			rposely give false or misleading information nay be fined, be sentenced to jail, or both
(Student Wet Signature I	NO PENCIL)	(Date)		(Stud	ent's ID Number)
3. Notary's Certificate of Acknow		. ,	ıry)	`	WITNESS my hand and official (seal)
tate of	City/County of				_
On .	before me,				
(Date)	,(No	otary's name)			
personally appeared,			, and	l provided to m	e
Printed) on basis of satisfactory evidence o	name of signer)				
	(Type o	of government-is:	sued ph	oto ID provided)	-
o be the above-named person w	no signed the foregoing in	strument.			
Signature:	My commission expires on:				
(Notary signature)				(Date	e)
FINANCIAL AID OFFICE	VERIFICATION:				
Type of ID submitted:	D	eceived by:			Date: