Independent

Statement of Educational Purpose Verification Worksheet 2022-2023

Your Free Application for Federal Student Aid (FAFSA) was selected for review in a process called “Verification”. This worksheet is used to verify a student’s Educational Purpose and High School Completion Status.

What you must do

1. Complete and sign this worksheet.
2. Submit the completed worksheet to Roanoke College Financial Aid Office, 221 College Lane, Salem, VA 24153. Do not mail this form to the Dept. of Education.
3. Contact our office at 540-375-2235 if you have questions about completing this worksheet.

A. Statement of Educational Purpose

I certify that I ______________________________________________, am the individual signing this “Statement of Education 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 Roanoke College for 2022-2023.

______________________________________________________________________    ____________________
Student Signature                                Date

____________________
RC ID Number

Notary’s Certificate of Acknowledgement

State of _____________________________________________________________________________________
City/County of ________________________________________________________________________________

On ______________________, before me, __________________________________________________________,
(Date)                         (Notary’s name)

personally appeared, ____________________________________________________________, and provided to me
(Date)                         (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
(seal)                                            _________________________________
(Notary signature)

My commission expires on _________________________
(Date)
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C. Signature(s)

I acknowledge that if I purposely give false or misleading information on this worksheet, I may be fined, be sentenced to jail, or both. I also realize that if the Roanoke College Financial Aid Office believes that the information I provide is inaccurate, I may be required to submit additional documentation.

________________________________________________________________________

Student ____________________________ Date ____________

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