

(V4) 2022-2023 Verification Worksheet

COMPLETE SECTIONS A-D and attach any applicable documentation. You must sign this worksheet. Appear in person and show a Financial Aid staff member your valid government-issued photo ID AND sign the Educational Purpose Statement in the presence of a Financial Aid Staff Member. If you are unable to appear in person, you must contact the Financial Aid Office for further instructions. Military ID is not acceptable for this form. The Financial Aid Office cannot process your application without this information.

FEDERAL STUDENT AID PROGRAMS: Your application was selected for review in a process called "Verification." In this process, the Financial Aid Office compares information from your FAFSA application with your financial documents. We are required to review your FAFSA information under financial aid program rules (34 CFR, Part 668). The law says we have the right to ask you for this information before awarding Federal aid. If there are differences between your application information and your financial documents, corrections to your FAFSA may be required.

A: STUDENT INFORMATION				
Last Name:	First Name:	Middle Initial:		
Social Security #:	ctcLink ID #:	DOB:		
B: EDUCATIONAL PURPOSE				
Completion of this section MUST BE WITNESSED	BY A FINANCIAL AID STAFF MEMBER.			
I certify that I,	(print first and last nam	e) am the individual signing this State	ment of	
•	financial assistance I may receive will only be used to			
of attending Bellevue College for the 2022-2023 s	chool year.			
Student Signature:	ctcLink ID #:	Date:		
If you are unable to appear in person, you must co	ntact the Financial Aid office for further instructions.			
Witnessing Financial Aid Staff Member's Signature:		Date:		
		I		
C: REQUIRED SIGNATURES				
I affirm that the information provided in this applic	cation and other financial aid documents is true and	correct to the best of my knowledge.	l agree	
_	conditions, responsibilities and obligations in order		023	
academic year as stated in the Conditions of Award	d and Satisfactory Academic Progress Policy, availabl	e on the Financial Aid website.		
Student Signature: Date:		Date:		

D: NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT (origin	nal hard copy must be mailed in – cannot be faxed)	
Only applicable if student is not able to appear in person with governm	ent issued ID to Financial Aid Office.	
State of	, City/County of	
on(date), before me,	(notary's name),	
personally appeared,	(printed name of signer), and provided to me on	
basis of satisfactory evidence of identification	(type of government-	
issued photo ID provided) to be the above-named person who signed the	e foregoing instrument.	
WITNESS my hand and official seal	(notary signature)	
My commission expires on(date).	
	Place seal here.	

Bellevue College Financial Aid Office • 3000 Landerholm Circle SE • Bellevue, WA 98007-6484 (425) 564-2227 • www.bellevuecollege.edu/fa

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