2022-2023 DEPENDENT

CUSTOM VERIFICATION GROUP

School: Erskine College and Theological Seminary

Student	Name:	

SSN:

Your 2022-2023 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. Should additional space be required for any of the below fields, a separate sheet may be attached to complete the data. In addition, the student and parent will need to sign and date each additional sheet. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE – Student must sign the below statement (this does not replace the required signature(s) at the bottom of this form) in person and their unexpired government-issued photo ID kept on file. If they cannot be present at the school they must sign the statement in front of a Notary with the Notary's information also completed. The School representative must sign confirming they have copied the unexpired government-issued ID and will ensure it is maintained at the institution for the required Title IV record retention period.

Check the box that applies:	In Person at the School	In Person in Front of a Notary	
	E		
IDE	NTITY AND STATEMENT OF EDUCA	FIONAL PURPOSE (To be signed at th	ne institution)
The student must appear in person a	t Erskine College and Theological	Seminary to ve	erify his or her identity by presenting
	,	ary Educational Institution)	
		nited to, a driver's license, other state-is	
		he institution with the date it was receive	ed and reviewed and the
name of the official at the institution a	authorized to receive and review the stud	dent's ID.	
Statement of Educational Purpose	<u>)</u>		
I certify that I		am the individual signing this Statem	nent of Educational Purpose
	(Print Student's Name)		
and that the Federal student financial	assistance I may receive will only be u	sed for educational purposes and to pay	the cost of attending
Erskine College and Theological Sen	ninary fo	or 2022-2023.	
(Name of Post Secondary	Educational Institution)		
(Student's S	ignature)	(Date)	
School Official Certification			
School official Certification			
I have received and reviewed		government-issue	d ID
	(Student Name)	0	(Type of ID)
on			
(Date reviewed)			
(School official signa	ature)	(Print Name)	(Date)

2022-2023 DEPENDENT

CUSTOM VERIFICATION GROUP

School: Erskine College and Theologica	al Seminary				
Student Name:	SSN:				
Notary's Certificate of Acknowledgement					
IDENTITY AND STAT	EMENT OF EDUCATION	ONAL PURPOSE (To be signed	d in the presence of a Notary)		
The student is unable to appear in person at		nd Theological Seminar Post Secondary Educational Inst			
the student must provide to the institution;					
(a) A copy of the unexpired government-issu	ed 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 d	river's license, other sta	ate-issued ID, or passport; and			
(b) The original Statement of Educational Pu separate page than the Statement of Ec was the document notarized.					
Statement of Educational Purpose					
I certify that I		am the individual signing	this Statement of Educational Purpose and		
(Print Studer	,				
that the Federal student financial assistance I may	y receive will only be us		t to pay the cost of attending		
Erskine College and Thelogical Seminary (Name of Post Secondary Educational In	astitution)	for 2022-2023.			
	istration)				
(Student's Signature)		(Date)	_		
Notary's Certificate of Acknowledgement					
State of	,City/County of		On,		
			(Date)		
before me,(Notary's Na		, personally appeared,	(Printed Name of Signer)		
	,				
and proved to me on basis of satisfactory evidence	e of identification	(Type of Government-Issued F	to be the above-named		
person who signed the foregoing instrument.					
seal	WITNESS	my hand and official seal			
		N. O			
	(Notary's Signature)		mission Expires On:(Date)		
C. CERTIFICATION AND SIGNATURE					
By signing below, you certify that all of the	ne information reported is o	complete and correct. <i>The student/</i> p	parent reported on the FAFSA must sign and date.		
Student Signature		Date	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.		
Parent Signature		Date			

DJA 12/7/20