

Bronx Campus Office of Student Financial Services 2501 Jerome Avenue Bronx, NY 10468 Phone: (646) 393-8400 New Rochelle Campus Office of Student Financial Services 434 Main Street New Rochelle, NY 10801 Phone: (914) 740-684

2025-26 CUSTOM VERIFICATION GROUP - NOTARY (V4)

Your Free Application for Federal Student Aid (FAFSA) was selected by the Federal Department of Education for review in a process called "Verification." In this process, the Office of Student Financial Services will compare information from your FAFSA with this worksheet and any other required documents. The Verification must be finalized prior to the distribution of federal aid. If inconsistencies are found between your FAFSA, verification worksheet, and other documentation, the Office of Student Financial Services may electronically amend the necessary changes.

- 1. Complete all sections of this worksheet that apply to you.
- 2. Submit the completed and signed Verification Worksheet along with the requested documentation to the Office of Student Financial Services.

Last Name	First Name			Monroe University ID Number	
Address (include Apt.#)	City	State	Zip Code	Date of Birth (MM/DD/YYYY)	
Cell Phone #	Home Phone #			Personal E-Mail	
B. IDENTITY AND STATEMENT OF EDUCAT	ΓΙΟΝΑL PURPOSE (Το Be	Signed in the pre	sence of a Notary)		
The student is unable to appear in person at Mathe institution both of the following items: (a) A copy of the unexpired valid government presented to a notary, such as, but notarized. (b) The original Statement of Educational Punotarized.	ment-issued photo identifica ot limited to, a driver's licen Il Purpose provided below,	ation (ID) that is ack se, other state-issu which must be nota	nowledged in the nota ed ID, or passport; and rized. If the notary sta	ary statement below, or that is d tement appears on a separate pag	
I am unable to appear in person at Monroe Unipresence of the notary.	versity - Bronx/New Rochel STATEMENT OF EL			atement of Educational Purpose in	
I certify that I(Print Student's First Name and that the federal student financial assis	•				
attending <u>Monroe University – Bronx/N</u>	•				
Student's Signature	Monroe Unive	rsity ID Number	Date		
	IOTARY'S CERTIFICAT				
State of	, City/County of			on	
before me,(Notary's Name) proved to me on basis of satisfactory evidence signed the foregoing instrument.	, perso	nally appeared,	(Drinted name of	f signer)	
WITNESS my hand and official seal (seal)	(Notary Signatu				
	My commission expires	on(Dat	<u>e)</u>		

Student's First and Last Name:	Monroe University ID Number:
C. CERTIFICATION	
0 0	the information reported on this form is complete and accurate. WARNING: If you purposely give t, you may be fined up to \$20,000, be sentenced to jail, or both.
Student's Signature	Date
Completed by the designated financial aid admini	***** OFFICE USE ONLY ***** istrator:
ID Type:	Copy of ID attached:
Designated FAA Name:(Pri	int Designated FAA Name)
Designated FAA Title:	
Designated FAA Signature:	Date:

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