



# 2024-25 DEPENDENT VERIFICATION WORKSHEET

V4 - Custom Verification

Your FAFSA application was selected by the Department of Education for a process called *Verification* at Lower Columbia College (LCC). The Financial Aid Office will compare information from your FAFSA application with the documentation you provide through this form. The law requires the college to collect and verify this information before awarding Federal Student Aid. If there is a difference between the information on your FAFSA and the information listed on this form, the college will make a correction to your FAFSA application electronically. The Financial Aid Office cannot process your financial aid without this information.

**Note:** A student is considered Dependent if they were required to provide parental information on the FAFSA.

## IMPORTANT INFORMATION

- This form must be completed **IN-PERSON** at either LCC's Financial Aid Office / [One-Stop Center](#) – **OR** – in the presence of a notary, returning the original (wet-signed) document to the Financial Aid Office / One-Stop Center. Electronic copies/signatures are **NOT** acceptable.
- All sections of this form must be completed. If a section does not apply to you, write "NA".
- The Financial Aid Office publishes a [quarterly priority deadline](#) and submission of this document after this date may cause a delay in receiving your aid. Return this form as soon as possible.
- It takes a minimum of 3-6 weeks to fully process students financial aid from the date all required documents have been submitted to the Financial Aid Office.

### RETURN THIS FORM TO:

LCC Financial Aid Office  
1600 Maple St. / P.O. Box 3010  
Longview, WA 98632  
Phone: (360) 442-2390

STUDENT INFORMATION	
Last Name:	First Name:
Student ID #:	Email:

## STEP 1: STUDENT – IDENTITY VERIFICATION

- I am appearing in person at Lower Columbia College with my original, unexpired, and valid government-issued photo identification (driver's license, state identification card, or passport). The college will maintain a copy of your photo ID that is annotated with the date it was received and reviewed, and the name of the official at the institution authorized to receive and reviewed your ID.  
– OR –
- I live more than 50 miles from campus **AND** will be attending online classes only and therefore am unable to appear in person. I am attaching the original notarized copy of my unexpired and valid government-issued photo identification to this form (driver's license, state identification card, or passport).

## STEP 2: STUDENT – STATEMENT OF EDUCATIONAL PURPOSE

- I am appearing in person at Lower Columbia College to sign the statement below (you must sign statement in front of financial aid/one-stop staff).  
– OR –
- I am unable to appear in person to submit the above statement and have had the statement notarized (see next page). LCC does not reimburse for any fees associated in the notarizing process.

I, certify that I, \_\_\_\_\_, am the individual signing this Statement of Educational Purpose and that  
(Print Student's Full Name)

the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Lower Columbia College for the 2024-2025 academic year.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**MUST SIGN IN FRONT OF FINANCIAL AID/ONE-STOP STAFF OR NOTARY**



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## STUDENT INFORMATION

Student Name:	Student ID #:
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**Notary Use Only (Only use if NOT appearing in person at the One-Stop/Financial Aid Office)**

State of \_\_\_\_\_

City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_,  
(Date) (Print Notary's name)

personally appeared, \_\_\_\_\_, and proved to me  
(Printed name of signer)

because of satisfactory evidence of identification \_\_\_\_\_  
(Type of unexpired 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)

## STEP 3: SIGN THE WORKSHEET

By signing this worksheet, I (we) certify that all information reported on this worksheet is complete and correct. As a dependent student, the parent whose information is reported on the FAFSA must also sign and date.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE:** If you are submitting notarized documents, the **ORIGINAL NOTARIZED DOCUMENTS** must be mailed to LCC.

<b>FAO USE:</b> If appearing in person, student must sign in front of LCC staff. All issues with identity must be reported to the Department of Education for purposes of tracking fraud. Notify the Financial Aid Director if there are issues verifying identity.	Received by:	Date:
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