## REDROCKS COMMUNITY COLLEGE FINANCIAL AID

# 2020-2021 Verification Worksheet – Form 4

Student ID Number	
Student Name:	Phone Number:
-	ailure to accurately complete this form may result in a ligibility. Additional documentation may be requested.
Section 1: High	h School Completion Status
Please submit documentation to verify you have documentation can include:	completed a high school education. Acceptable
<ul> <li>A high school diploma or a copy of an official h completion date</li> <li>GED certificate or transcript</li> </ul>	nigh school transcript. Transcripts must verify graduation
	copy of a GED obtained in the State of Colorado. cessfully completed at least a two-year program that is acceptable ny participating school
<ul> <li>If high school completed in foreign country, a document.</li> </ul>	must be translated and evaluated. For a list of qualified service
Type of documentation submitted:	
Designated institutional official:	
19	School official's printed name)
Se	ection 2: Identity
	SIGNED AT THE FINANCIAL AID OFFICE
If unable to appear in person at the Financia	al Aid Office, you must complete this section with a notary
You must appear in person at(Name of	Financial Aid Office to verify your
identity by presenting a valid unexpired governn	finstitution) ment-issued photo identification (ID), such as, but not limited assport. The institution will maintain a copy of your photo ID.
Type of documentation submitted:	
Designated institutional official:	
(:	School official's printed name)

Student ID Number: S

#### **Section 3: Statement of Educational Purpose**

#### **MUST BE COMPLETED & SIGNED AT THE FINANCIAL AID OFFICE**

### If unable to appear in person at the Financial Aid Office, you must complete this section with a notary

In addition, you must sign, in the presence of the institutional official, the following:			
I certify that I	am the indiv	vidual signing this	
I certify that I(Student's pri	nted name)		
Statement of Educational Purpose	and that the federal student finance	cial assistance	
I may receive will only be used for	educational purposes and to pay th	ne cost of attending	
		for 2020-2021.	
(Na	ime of institution)		
Student Signature:		Date:	
<u>Nota</u>	ary Section Instructions: Please Re	<u>ad</u>	
This section should only be completed if you this form (the original on which the seal is with the copy of the government-issued identified the copy of the government is such as the copy of the copy of the government is such as the copy of the copy of the government is such as the copy of the copy of the government is such as the copy of the copy of the copy of the copy of the government is such as the copy of	visible) should be mailed to the Financia	cial Aid Office at your institution along	
<u>Notar</u>	y's Certificate of Acknowledgemer	<u>nt</u>	
State of	City/County of		
On, b	efore me		
(Date)	(Notary'	(Notary's name)	
Personally appeared		and proved to me on the basis of	
	(Printed name of signer)		
Satisfactory evidenceof Identification		to be the above-named	
(Type of unexpired government-issued ID provided)			
M	y commission expires on	, 20	
Notary(Print):			
Notary (Signature):		(Seal)	