## 2024 – 2025 V4 VERIFICATION WORKSHEET



Please complete and return this form to:

Financial Aid Office Red Oak Center

P.O. Box 518 Rhinelander, WI 54501 715-365-4423 or 800-544-3039

Fax: 715-365-4918

Financial\_aid@nicoletcollege.edu

Your 2024 – 2025 Free Application for Federal Student Aid (FAFSA) was selected by the Department of Education for verification to ensure you provided correct information on your FAFSA. The Financial Aid Office will compare your FAFSA with the information on this worksheet along with any other required documents and make any necessary corrections. You must complete and sign this worksheet, attach any required documents, and submit the form to the Nicolet College Financial Aid Office. If you have questions about verification, contact the Financial Aid Office as soon as possible so that your financial aid will not be delayed.

Α.	Student's Information						
	Student's Full Name  Student's Mailing Address (include apt. no.)				Nicolet College Student ID Number  Student's Date of Birth		
	City	State	Zip	Code	Student's Nicolet Email Address		
	Student's Cell Phone Number				Home Phone Number		
В.	Documentation	on of Identity/Stat	ement of Edu	ıcational Pu	rpose		
Identi	ty and Statement	of Educational Pu	pose (If unabl	e to sign at N	licolet College, see next page)		
photo i U.S. pa include identifi	identification (ID), su assport. The instituti as the date the ident cation.	ich as, but not limited to on will maintain an ann ification was presented	o a driver's licens totated copy of th , and the name o	e, non-driver's e unexpired val of the institutiona	by presenting an unexpired valid government-issued identification card, other State-issued identification, or id government-issued photo identification that ally authorized individual who reviewed the statement of Educational Purpose provided below.		
	ment of Educatio			,			
I certif	fy that I,, am the individual signing this Statement of (Print Student's Name)						
		`	udent financial		nay receive will only be used for educational 5.		
(Stude	nt's Signature)		(Date)	(Student's	s ID Number)		
Financ	ial Aid Administrator	· Signature)	(Da	 ate)			

## Identity and Statement of Educational Purpose (If unable to sign at Nicolet College, complete in the presence of a Notary)

<del>;</del>				
ederal student financial	assistance I may receive			
(Date)	(Student's ID Number)	)		
City/County of		on		
ame)	, personally appeared,(printed name of signer)			
•	(Type o	of government-issued photo provided)		
(Date)	(Date com	nmission expires)		
	ent's Name) ederal student financial nding Nicolet College f  (Date)  City/County of, perselame) sfactory evidence of idea	, personally appeared,		

## (Official Seal)

When you return this form to Nicolet College, you must include a copy of the unexpired valid government-issued photo identification (ID) that is presented to the notary.