



ST. LAWRENCE UNIVERSITY

2025-2026 Financial Aid Dependent Verification Worksheet (V4)

Complete all sections (A-C). If a section does not apply, enter "NA" - **do not leave any section blank.**

A. Student's Personal Information

Last Name First Name M.I.

SLU ID#

Address

Home Phone (include area code)

City State ZIP Code

Cell Phone (include area code)

B. Verification of Identity and Statement of Educational Purpose

Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person at the St. Lawrence University Financial Aid Office to verify their identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID. In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

Identity and Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at the St. Lawrence University Financial Aid Office to verify their identity, the student must provide to the institution:

- a) A copy of the unexpired valid government-issued 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 driver's license, other state-issued ID, or passport; and
- b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Student Name: _____

Statement of Educational Purpose

I certify that I, _____, am the individual signing this Statement of
(Print Student's Name)

Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending St. Lawrence University for 2025-2026.

(Student's Signature)

(Date)

(Student's ID Number)

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____

(Date)

(Notary's Name)

personally appeared, _____, and proved to me

(Printed name of signer)

on basis 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)

C. Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Student Signature

Date

WARNING

If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

Submittal Information

**St. Lawrence University
Office of Financial Aid
23 Romoda Drive
Canton, NY 13617**