## **Evangel University** 2025-2026 V4 Verification Worksheet

Your 2025-2026 FAFSA was selected for review in a process called Verification. To verify that you provided correct information, Evangel University will compare your FAFSA with the information on this worksheet and with any other required documents. The law states that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. If there are differences, you or the school may need to make corrections. Contact the Office of Financial Aid with any questions.

A. Stud	dent's Info	rmation					
Student's	Last Name	Student's First Name	Student's M.I.	Student ID #	Student's D.O.B.		
B. Ider	ntity and S	tatement of Educ	cational Purpos	e Information:	In Person OR Notarized		
presenting ID, or pass received a	g an unexpired values sport. The institute of the name of	valid government-issued pattern will maintain a cope the official at the institut	photo identification (II by of the student's photion authorized to colle	D), such as, but not lim to ID that is annotated of the student's ID.	versity to verify his or her identity by ited to, driver's license, other state-issued by the institution with the date it was		
		must sign, in the presen					
Ι	I certify that I(Print Student's Name)			am the individual signing this Statement of Educational			
D	Purnose and that	,	*	eceive will only be use	ed for educational nurnoses		
	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 Evangel University for 2025-2026.						
a	ind to pay the ex	ost of attending Evanger (	Jiliversity for 2023-20	20.			
(	Student's Name	e)		(Date)			
_			_				
(	Student's ID nu	ımber)					
OTARY:	The above star	tement must be signed in	n the presence of a no	tary if the student is	unable to appear in person at Evangel		
		her identity, the studen		J			
(a)					is acknowledged in the notary statement		
4.		ch as, but not limited to,			assport; and		
(b)	The origi	nal notarized Statement of	f Educational Purpose	provided below.			
No	tary's Certific	ate of Acknowledgemen	t				
Sta	te of						
Cit	y/County of						
On		, before me,		pe	ersonally appeared,		

(Notary's Name)

(Date)

	, and provided to me on basis of satisfactory	
(Printed name of signer)		
evidence of identification	, to be the above-named person w	ho
(Type of governme	ent-issued photo ID provided)	
signed the foregoing instrument.		
WITNESS my hand and official seal		
(seal)	(Notary's signature)	
	My commission expires on	
	(Date)	
information for the purpose of awarding financia	<u>v.evangel.edu/privacy-policy/</u> ). I agree to the processing of my personal l aid. *	
Print Student's Name:		
Student Signature:	Date:	
WARNING: If you purposely give false or mislea both.	ding information on this worksheet, you may be fined, be sentenced to ja	ıil, or
	received and processed to financially register with federal aid for 2025-2026. aid will not be disbursed until verification is complete.	

Return this form (with original signatures) and the copy of your ID in-person or mail\*:

Office of Financial Aid
Attn: FAFSA Verification
Evangel University
1111 North Glenstone Avenue
Springfield, Missouri 65802

\*Original documents are required, do not upload, fax, or email.